

Mr. & Mrs. Cornelia C. (Mrs) E. O. for 4975
WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
 Husband Was on the Pension Roll
 of Georgia.

County *Fulton*
 Name *Cornelia C. McElary*
 Widow of *Edgar McElary*
 Company *B*
 Regiment *Ind. S. C.*
 Date of Husband's Death *March 1924*
 Date of Marriage *Feb. 1894*
 Approved *Feb. 4, 1925*

N. E. Harris
 Commissioner of Pensions.

10-31-1924

Ordinary's Certificate

STATE OF GEORGIA

Fulton COUNTY.

I, *Thos H. Phillips*

know *Mrs. Cornelia C. McElary*, the applicant for pension; that she is the person

she represents herself to be, and that she is continuously a bona fide resident of said County since

January 1st, 1925; that I also know *W. B. McElary* the witness *McElary*

and that both 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.

Given under my hand and official seal of office this *18th* day of *Feb*, 192*5*
 (SEAL OF ORDINARY) *Thos H. Phillips* Ordinary,
Fulton County

Instructions.

1. Before any question are answered the Ordinary applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence."
2. Additional affidavits may be attached if such facts are insufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Affidavits must be made before the Ordinary of the County of residence.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person, or by personal knowledge of Disabled Pensioners must use the Blue Application Book and state and prove full term of husband's service—because Disabled Pensioners make no proof of service and were not required to do so.
6. Witnesses of Disabled Pensioners must use the Blue Application Book and state and prove full term of husband's service—because Disabled Pensioners make no proof of service and were not required to do so.

Mrs. Mary Cornelia C. (Mrs) E. O. Jeffries
Feb. 4, 1925
WIDOW'S APPLICATION
 To Be Put on Roll in Her Own Right When
 Husband Was on the Pension Roll
 of Georgia.

County *Fulton*
 Name *Cornelia C. Jeffries*
 Widow of *W. B. Jeffries*
 Company *B*
 Regiment *2nd S. I.*
 Date of Husband's Death *March 1924*
 Date of Marriage *1874*
 Approved *Feb. 4, 1925*

N. E. Harris
 Commissioner of Pensions.

10-31-1924

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

1. *Thos H. Jeffries* Ordinary of said County, do certify that I know Mrs. *Cornelia C. Jeffries*, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know *W. B. Jeffries*, the witness ~~as to~~ marriage, and that both 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.

Given under my hand and official seal of office this *10th* day of *Apr*, 192*4*.
 (SEAL OF ORDINARY) *Thos H. Jeffries* Ordinary,
Fulton County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You 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 of the County of residence.
4. Only widows who are married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage licenses if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

Lake City, S. C. April _____ 1924.

Personally appeared A. W. Flagler who swears that he was present at the marriage of S. G. McClary and Cornelia C. Chandler and that said marriage occurred in Williamsburg County, South Carolina on December the 23, 1874.

Sworn to and subscribed before me.
this 5 day of April 1924.

J. E. Snowden
Judge of Probate

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be Used by the Widow of a Disabled Soldier Pensioner.)

STATE OF GEORGIA,

Fulton

COUNTY.

Personally before me comes Mrs. Cornelia C. McClary of said County, who, after having been duly sworn, says that she is the widow of S. G. McClary to whom, in the County of Williamsburg State of S. C. she was married on the 13 day of Dec. 1874 and that she remained his wife, and resided with him to the date of his death in March 1914 and that she has not since his death remarried; at the time of his death he was a resident of Fulton County, in said State of Georgia, and he was on the Pension Roll of the State and paid a pension of \$100.00 in Fulton County for 1914 (per annum), on account of being a soldier in Company B, Infantry 1st Regt S. C. (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Ga and she has, continuously, resided there since day of April 1905

Sworn to and subscribed before me, this the

8 day of April, 1924.

Arthur R. Maubius Ordinary
of Fulton County.

Cornelia C. McClary
(Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

Fulton

COUNTY.

Personally before me comes W. B. McClary known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. C. C. McClary, who made the foregoing affidavit, is the lawful widow of S. G. McClary who died in Fulton County in said State of Ga on the 13 day of March, 1914, and that she has not since remarried; ~~that she became the wife of~~ on the 13 day of March, 1914; that she and he had resided together as husband and wife, continuously, since to the date of his death, and that he was the same man who was on the pension roll of said State Ga from Fulton County when he died.

Sworn to and subscribed before me, this the

8 day of April, 1924.

Arthur R. Maubius Ordinary
of Fulton County.

W. B. McClary

(SEAL OF ORDINARY)

Person of
11/8-1910

Fails to
from only
as
well as
this
under

Advising
Advising

Mr. C. G. C. C.
Fulton County

Approved 11/8/10
No.

Confederate

Soldier's Application.

✓ UNDER ACT 1910.

County Fulton

Name Samuel G. McElroy

Company A

Regiment 10 SC Reg

Approved

J. W. GIBSON
Commandant of Forces

CHAS. F. BYRD, State Printer, Atlanta

1910

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Sheldon 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) *S. B. McHenry*
Atlanta Fulton County Ga
2. How long and since when have you been a continuous resident citizen of this State?
5 years or more
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? *Yes, Army of Confederate States*
4. When and where, and in what company and Regiment did you enlist? (Give the arm and class of Service) *Nov 1st 1861 Williamsburg, Va. Co. A. 10th S & C*
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) *April 26th 1866*
6. When and where was your Company and Regiment surrendered or discharged from the Service? *April 26th 1866 - Greensboro N Carolina*
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.
I was present
9. Where was your Command when you left it? *Greensboro N Carolina*
Surrendered
10. When did you leave the Command? *April 26th 1866*
11. For what cause did you leave? *Surrendered*
12. By whose authority did you leave? *Federal & Confederate*
13. For how long was your leave granted? In what way? *Surrendered and Paroled*
14. Why did you not return to your Command after leave expired? *Paroled*
15. In what way were you prevented? *Surrendered & Paroled*
16. What effort did you make to return? *None*
17. Were you captured during the war? *No*
18. If so, when, and where? In what prison were you held and when were you released?
Was not captured
19. 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.)
One half interest in a house & lot in Atlanta Ga valued and assessed at \$7000
20. 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*
21. 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.)
One half interest in house and lot in Atlanta Ga valued at \$14000
Applicant's half valued at \$7000
22. What annual or monthly income or earnings of yourself and wife and the source derived have you? *Not anything*
23. Are you drawing a pension of any amount from this State or the United States? *No*
24. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? *No*

Sworn to and subscribed before me, this the *15th* day of *April* 1911, at *Atlanta* Georgia, I, *John D. Wren*, Ordinary of *Fulton* County.

Received 11/8-1910
James H. Wren
Thos. Wren
& family as
well as
their
underwritten
at Atlanta
Geo. W. Wren

McHenry, Samuel B.
Sheldon County
discharged 11/8/1910

Confederate
Soldier's Application.

UNDER ACT 1910.

County *Sheldon*
Name *Samuel B. McHenry*
Company *A*
Regiment *10 SC Reg*
Approved

J. W. LINDSEY,
Commissioner of Pensions

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
 Wilkes County.

I, J. W. Graham, of said State and County is hereby presented as a witness in support of the application of Samuel B. McElroy 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? Isaac W. Graham
near Southern Co.
2. How long and since when have you known Samuel B. McElroy the applicant?
since his birth
3. Where does he now reside, and since when has he been a homophile, continuing resident in this State and how do you know? on Atlantic Ave. about 6 miles, on
the road near the Southern Co. and
4. When, where and in what Company and Regiment did Samuel B. McElroy enlist during war from 1861 to 1865? (Give date and place) He enlisted in the 1st Reg. U.S. Col. 1861
5. How did you obtain your information of this Service? from the
6. How long within your own personal knowledge did he perform actual military service with the Company and Regiment? (give date) about 4 years
7. When and where was his Command surrendered or discharged (give date and place)
Greensboro N.C. April 26th 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? I cannot say but have no doubt
11. If not where was he and how came him there?
12. When did he leave his Command? after the surrender Where was his Command when he left it? Greensboro N.C. for what cause did he leave? surrendered
 By whose authority did he leave? By order of General and how long was he granted leave? Indefinite How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) was present at surrender and saw him
13. In what way was he prevented from returning to his Command?
 How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner at surrender so, when and where?
 In what prison was he held? and when released?

Sworn to and subscribed before me, this the 4th day of Sept 1910
J. W. Graham Notary Public
Wilkes County, Georgia.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
 Wilkes County.

Personally before me comes P. D. Connally & M. C. Ellis who on oath says that they are free holders residing in said County and we know Samuel B. McElroy 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.) House & lot in City of Atlanta, which was sold about 1860
Applicant's net worth not over \$200

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.

1908? (State it fully by items.)

2. When and to whom was it sold or given to? None
3. What was the price paid or stated to be paid? None
4. What relation to 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 values? None

or was it made to obtain a pension?

Sworn to and subscribed before me, this the 4th day of Sept 1910

Michael M. Anderson Ordinary
Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
 Wilkes County.

I, Michael M. Anderson Ordinary of said County, certify that I know the applicant Samuel B. McElroy for Pension is the person he represents himself to be and resides in said County. I also know the witness J. W. Graham 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 Returns of S. B. McElroy shows that for 1908 \$ 4.50 for 1909 \$ 10.95 for 1910 \$ 10.80 day of Oct 1910
Michael M. Anderson 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 Free holders unnecessary.

State of S. C. } J. M. Brockington Probate
 Wilkesburg Co. } Judge of said Co. certify
 that the witness J. W. Graham resides
 in said County and is known to me
 to be reliable and worthy of belief

Given under my hand and seal of
 office this the 4th day of Sept 1910

J. M. Brockington
 Probate Judge

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.

ENTERED ROSTER OFFICE

FILED IN ROSTER OFFICE, ATLANTA

J. W. LINDSEY,
Commissioner of Pensions

Approved

Regiment

Company

Name

County

UNDER ACT 1910.

Soldier's Application.

Confederate

20th Feb 1913

McClary, S. G.
Fullton Co. Ga.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Fullton County, S. G. McClary

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)
Saml S McClary Fullton Co Ga Atlanta
2. How long and since when have you been a continuous resident citizen of this State?
Since Apr 1905
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)
Oct 26th 62 Henry White Light Artillery Co. 1st Regt
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge)
From Oct 62 until the summer of 65
6. When and where was your Company and Regiment surrendered or discharged from the Service?
At Sumter or Monck's Pt. Apr 65
7. Were you actually present with your Command when it was surrendered or discharged?
Yes
8. If you were not actually present, state specifically and clearly where you were
- a. Where was your Command when you left it?
At Sumter Mc
- 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?
No
- j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4 Nov. 1908? (Make list by items and value.)
One house lot \$300 & some furniture Cash \$500
for what I had at that time but I am sure \$500 was the value of it
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.)
One house lot \$300 Furniture \$500
12. What annual or monthly income or earnings of yourself and wife and the source derived have you?
Nothing of us has any. We have no regular occupation
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. I have but I have not been allowed to have it because I am not a regular Confederate

Sworn to and subscribed before me, this the 19th day of May 1913
John R. Wilkinson Ordinary,
of Fullton County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Williamson County.

I, R. J. Tisdale, of said State and County is hereby presented as a witness in support of the application of E. J. McElary 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:

- What is your name and where do you reside? R. J. Tisdale, Mangrove, Williamson Co. Ga.
- How long and since when have you known E. J. McElary the applicant? All my life.
- Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Atlanta Ga. Discharged June 1906.
- When, where and in what Company and Regiment did he enlist during war from 1861 to 1865? (Give date and place) Co. H, 1st Reg. from Co. 2 to Co. 1, 1864. How did you obtain your information of this Service? From a number of men Company.
- How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) From Oct. 62 to Apr. 65.
- When and where was his Command surrendered or discharged (give date and place) At Anderson, S.C.
- Were you personally present at the Surrender? Yes.
- If not, where were you and how came you there?
- Was the applicant personally present with his Command at surrender? Yes.
- If not where was he and how came him there?
- When did he leave his Command? Apr. 65. Where was his Command when he left it? Anderson, S.C., for what cause did he leave? By whose authority did he leave? and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) With him all the time, until he was discharged.
- In what way was he prevented from returning to his Command? How do you know?
- What effort did he make to return to his Command and how do you know?
- Was applicant captured as a prisoner? No. If so, when and where? In what prison was he held? and when released?

Sworn to and subscribed before me, this 1st day of August, 1912, at Mangrove, Williamson County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Fulton County.

Personally before me comes P. D. Connally, who on oath says that they are freeholders residing in said County and we know E. J. McElary 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). House and lot at 151 Krogg St. Value \$114.00 owned equally by himself and wife.

- 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.
- When and to whom was it sold or given to?
- What was the price paid or stated to be paid?
- What relation is the party to applicant?
- What disposition was made of the proceeds of the sale?
- Was the disposition of this property made in good faith and full value? or was it made to obtain a pension? Sworn to and subscribed before me, this 1st day of August, 1912, at Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Fulton County.

John R. Wilkinson Ordinary of said County, certify that I know the applicant E. J. McElary for Pension is the person he represents himself to be and resides in said County. That I also know P. D. Connally & M. N. Ellis the witness swearing to the service and they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of E. J. McElary and wife value for tax in 1908 \$1895 for 1909 \$450 for 1910 \$1280. Sworn under my hand and official seal of office this 16 day of Oct 1912.

- 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, affidavit of freeholders unnecessary.

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.
 I, Thos H Jeffries, Ordinary of said County, do certify
 that I personally know Cornelia C McClary, the applicant, and that she
 is the lawful widow of W B McClary, and was on
 the Fulton Pension Roll of said Fulton County, and was paid
 a Pension from One Hundred County for 1923, and at the time
 of his death on the 18 day of March, 1924, there was due to
 him and unpaid his Pension of One Hundred Dollars from the State
 of Georgia, and I know W B McClary, the within
 witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 16 day of April, 1924.
 (Seal of Ordinary) Thos H Jeffries, Ordinary
Fulton County

McCLARY, S.G.

of <u>Fulton</u> County	1924
Application for Pension Due Deceased Soldier (UNDER ACT 1891)	
(To be paid to his Widow or Dependent Children)	
BY Mrs. <u>Cornelia C McClary</u> Widow of <u>W B McClary</u>	1924
Date of Marriage <u>Dec 13 1874</u>	
Date of Death <u>March 18</u>	1924
Approved and ordered paid. <u>May 1</u> 1924 <u>Thos H Jeffries</u> Ordinary: full set should be full of and this blank to Pension Department for ap- proval before you pay out the money, and then return it with your payrolls for per- manent filing in the Pension Department.	

Ed

GEORGIA, Fulton County
 I hereby authorize and constitute W B McClary, of said County, my
 lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1924,
 through my deceased husband, W B McClary, who was on
 Pension Roll and paid from Fulton County for 1923.
 Witness my hand this 8 day of April, 1924.
 Attested before me:
A R Marbut Cornelia C McClary

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, the Ordinary of said County, comes Mrs. Cornelia M. Gary
of said County, who after being duly sworn, on oath says that she is the widow of.....

and that said Pensioner was on the Pension Roll of Fullton County

and was paid a Pension of One Hundred (\$100⁰⁰) Dollars

from Fuelbon County for 1973 and that the said Pensioner

died in Fresno County California and that the said Pensioner

County on

the 1st day of August, 1944, and at the time of his death a Pension of \$100—
per month

was due him from. McCon County and unpaid for 1924.

Applicant further swears that she married the said D. J. McElary on 2/3 0 1934

the 25 day of Dec, 1874, in Williamsburg County and

State of A. C., 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 9 day of April 1991

ATLANTA, Ga., Feb. 11 - The Atlanta Braves have signed free agent pitcher Tim Lincecum to a one-year contract.

Ordinary *Cornelia M. Blox*

_____ County _____ (L. S.)

(Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Fullon County.

Personnel before me comes W.B. McClary

Personality before me comes..... who

on oath says that he knew S. J. My - Harry while in life

and that he knows Mrs. Cornelia C. McElroy, the

above applicant; and knows that the said

and _____

11

.....in the State of ON

the day of, 19....., and that they were residing

together as husband and wife at the time of his death on the 28 day of

March 1944 and that she is his dependent widow.

Sworn to and subscribed before me this 8 day of April 1964

Sworn to and subscribed before me this day of May, 1924.
Wm. B. Bissell

Michael M. Albert, Ordinary

Tulson County

(Seal of Ordinary)

INSTRUCTIONS:

1st. This form is for widows of Service and Disabled Soldier pensioners, who died after November 1st. If pensioner died after January 1st, leaving dependent children but no widow, their guardian may use this form in their behalf.

Do not use the government's large form of marriage certificate in common usage throughout the State, suitable only for framing. Such certificate is suitable for only for use in our region.

46. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the same signed and that lack of completion when filled in, will not be a ground for annulment.

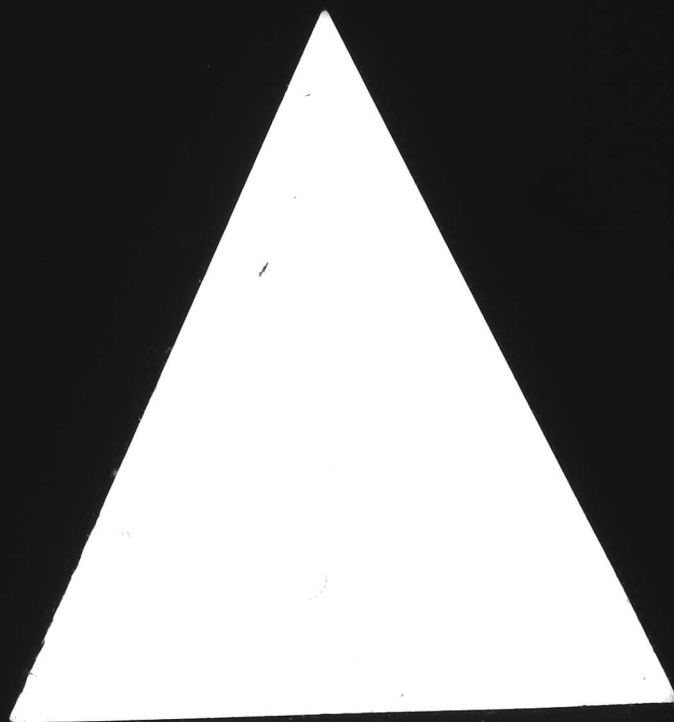
44. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.

the name of husband on the soldier pay roll.

white blood, to admit widow to roll in her own right. November 18 is the last filing date for the next year's roll.

[illegible]

W. G. Snowdon
Judge of Probate



McClellan, Ira F.
Fullton County
Oct No. 1905

INDIGENT PENSION.

190 *1905*

Name *Ira F. McClellan*
County *Fullton*
Co. *R. Phillips Regt.*
Approved *190*

John W. Lindsey
Commissioner of Pensions.

WARRANT HANDED TO

Mrs. S. McClellan

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

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

8/9/04. No W.P.

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 _____ 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 _____.
Executed in presence of _____

INDIGENT PENSION.

190

1905

Name *Mr. F. McCallan*

County *Fullen*

Ca. *R. Phillips* Regt.

Approved _____ 190 _____

JOHN W. LINDSEY

Commissioner of Pensions.

WARRANT HANDED TO

Mr. F. McCallan

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

JOHN W. LINDSEY, ATTORNEY AT LAW.

8/9/04.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
COUNTY.

I, *Mr. F. McCallan*, 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)
Mr. F. McCallan - Fullen Co. Ga. - Atlanta Heights
2. How long and since when have you been a resident of this State?
54 years -
3. When and where were you born?
May 30th 1845 - Lawrence Co. Ga.
4. When and where and in what company and regiment did you enlist or serve?
April 1862 - Cobb Co. Ga. - Company K Phillips Legion - Infantry
5. How long did you remain in such company and regiment?
Until Aug 1863 - Wounded in left leg - near Gaines Crossroads and taken prisoner
6. When and where was your company and regiment surrendered and discharged?
Don't know - Was captured and paroled on a battle field because of severe wound in left leg
7. Were you present with your company and regiment when it was surrendered?
No
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?
Was near Mican Ga. - Still suffering from wound - unable to go back, and was still under no back and was
9. How much can you earn (gross) per annum by your own exertions or labor?
Nothing
10. What has been your occupation since 1863?
Making rustic chairs
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?
About two years since I was able to do anything to earn a support - Wound in left leg - Paroled and spent time in trouble and was left sightless and
13. What property, real and personal, or income, do you possess, and its gross value?
None
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, 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?
Marston-Polk - Cobb and Fullen
16. How were you supported during the years 1899, 1900, 1901 and 1902?
By making rustic chairs and help of wife - she then lost her mind
17. How much did your support cost for each of those years, and what portion did you contribute thereby by your own labor or income?
About \$15 - Cost about a cent to a
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year?
Making chairs - about \$50 - Unable to work at all
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed?
No family at all - Have to live with and receive support from distant relatives
20. Are you receiving any pension? If so, what amount and for what disability?
None
21. Have you ever made an application for pension before?
No
22. How many applications have you ever made and under what class?
None
Sworn to and subscribed before me this _____ day of _____, 190 _____
John W. Lindsey Ordinary,
of *Fullen* County.

Every Question MUST Be Answered.

Mr. F. McCallan
Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Suflon COUNTY.

R. W. McCowan of said State and County, having been presented as a witness in support of the application of *Ira H. McClellan* for pension under section 1254, Code, 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? *R. W. McCowan (R. W. McCowan)*
Suflon County Ga
2. Are you acquainted with *Ira H. McClellan* the applicant; if so, how long have you known him? *Since 1855*
3. Where does he reside, and how long and since when has he been a resident of this State? *Suflon Co. Ga. State 30 years*
4. When, where and in what company and regiment did he enlist, and how do you know? *April 1862 - 68th Co. Ga. - Col. S. Phillips' Regt.*
5. Were you a member of the same company and regiment? *Yes*
6. How long did he perform regular military duty? *April Aug 1863*
7. When and where was his command surrendered? *April 1865 - at Greenville, S. C.*
8. Were you present when it surrendered? *Yes - Lieutenant*
9. Was applicant present? *No - was away because of wound*
10. If he was not present, where was he? *He was wounded at Gettysburg*
When did he leave his command? *Aug - 1863* For what cause? *Wounded*
By what authority he left? *He was wounded* How do you know all of this? *and Captains - I was there at the time he was wounded and captured*
11. What property, effects or income has the applicant? (Give your means of knowledge.) *Nothing*
None known him all the time
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? *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? *Bad leg - fractured - wound - bad eye sight - Lung trouble - Short breath & weak*
15. Is the applicant unable to support himself by labor of any sort; if so, why? *He is - because of wound - bad eyes - Lung trouble, short breath & weak*
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? *By his sister*
relatives and a little work at times
17. What portion of his support for these four years was derived from his own labor or income? *Not more than one half*
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? *He is old, wounded - Lung trouble - Short breath & weak*
19. Who compose family? What property have they? Children's age and their earning capacity? *Has no family*

20. What interest have you in the recovery of a pension by this applicant? *None*
Sworn to and subscribed before me, this 20 day of *Aug* 1904
John W. Williams Ordinary.
R. W. McCowan Witness.
Ira H. McClellan

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Suflon COUNTY.

Personally came before me *A. H. Braslin* and *J. H. Bradford* both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully *Ira H. McClellan* and *R. W. McCowan* applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

That he is suffering from chronic disease - white has very weak eyesight is very bad - is suffering with partial paralysis - is the result of an old wound in left leg - these disabilities are permanent and that he has no interest in the pension being allowed

Sworn to and subscribed before me, this 1 day of *Aug* 1904
John W. Williams Ordinary. *A. H. Braslin* *J. H. Bradford* M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Suflon COUNTY.

I, *John W. Williams* Ordinary, in and for said County, hereby certify that the applicant *Ira H. McClellan* resides in said County, and has been a bona fide resident of this State since the day of *Aug* 1896 and that the witnesses, viz.: *R. W. McCowan*

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

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

I further certify that the tax digest of _____ 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 *20* day of *August* 1904
John W. Williams Ordinary,
of *Suflon* County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

WITNESS my hand and seal, this _____ day of _____, 1905.

[L. S.]

Executed in the presence of _____

McClellan, Bro. & Co.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

No. 130

INDIGENT
SOLDIER'S PENSION
1905.

Name *Dr. The. Wilson*

County _____

Co. _____ Regiment _____

Phillips Legion
WARRANT ISSUED

1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO _____

8/12

no date

McClellan, Bro. & Co.
Fulton Co.

(FOR THOSE ALREADY ENROLLED.)

No. 184

INDIGENT
SOLDIER'S PENSION
1906.

Name *Dr. The. Wilson*

County _____

Co. _____ Regiment _____

Phillips Legion
WARRANT ISSUED

1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO _____

8/12

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 _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears Wm. F. McCallum

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 1845; that he is 60 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 12 mos. in Company L, of 2th Regiment of Phillips Legion 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, 1904, 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 7th day of January, 1905.

Ordinary.

STATE OF GEORGIA,

County.

I, Wm. F. McCallum, 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 11th day of January, 1905.

Ordinary.

County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears Wm. F. McCallum

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 1845; that he is 60 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 12 mos. in Company L, of 2th Regiment of Phillips Legion 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, 1904, 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 7th day of January, 1905.

Wm. F. McCallum Ordinary.

State of Georgia,

County.

I, Wm. F. McCallum, 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 11th day of January, 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 _____, 1907.

[L. S.]

Executed in presence of _____

*McClellan Ora F.
 Andrew R.*

Cross Number 1284.
 (FOR THOSE ALREADY ENROLLED)

No. 143

INDIGENT
 SOLDIER'S PENSION
 1907.

Name, *Ora F. McClellan*

County, _____

Co. _____ Regiment _____

Phillips Reg. Co.
 WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H.
 CHAS. W. BARNES, DEPT. OF PENSIONS, N. Y. OFF.

no do

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Person appears John R. Williams of Wilkes County.

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 1845; that he is 61 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 18 months in Company 1st of 1st Regiment of Phillips Legion; that his physical condition is as follows: aged & poverty

that his property consists of the following items:

of the value of 2 Dollars. I am now earning by my labor, 2 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for

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

Sworn to and subscribed before me, this the 7th day of July, 1907. J. H. Williams Ordinary.

State of Georgia,

County. I, John R. Williams Ordinary of said County,

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

Given under my official signature and seal this 7th day of July, 1907.



John R. Williams Ordinary Wilkes County.

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

State of Georgia,

County.

I, John R. Williams, Ordinary of said County,
do certify that I am well acquainted with Era L. McCallister
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 _____ 1907.



John R. Williams
Ordinary _____ County.

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

INSTRUCTIONS

of ~~Patron~~ County

1937

Full ton

COUNTRY

THOMAS. H. JEFFRIES, Ordinary of said County, do certify

the applicant for

Mr. J. Jennie Taylor

and credit.

1937

Mr. C. E. Llan, Sarah
Tulston, Ok. (M)
Y. C. 1938

~~CONFEDERATE DIVISION~~
STATE DEPARTMENT OF PUBLIC WELFARE

~~CONFEDERATE DIVISION~~

Ira F. McClellan enlisted as a private in Co. L, Phillips' Legion Ga' Infantry Apr. 15, 1862. Roll for July-Aug. 1864, dated Jan. 28, 1865, last roll on file, shows him absent without leave.
(Washington record.)

William Henderson
Director Confederate Records
Div.

AUG 19 1937

State Dept. Public Welfare,
Atlanta, Dec. 5, 1937.

Ira P. McClellan enlisted as
a private in Co. L, 15th
Lerion Se. Infantry Apr. 15,
1862. Roll for July-Aug. 1864,
dated Jan. 28, 1865, last roll
on file, shows him absent with-
out leave.
(Washington record.)

In his pension application, 1905,
Fulton County, he stated that he
was wounded in left leg, Gaines
Cross Roads, Va., Aug. 1863.
Never able to rejoin command ac-
count of wounds.

Ira P. McClellan
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. Sarah McClellan
Widow of Ira H. McClellan
Date of Marriage Nov. 20, 1904
Company 15th Lerion Se. Inf.
Regiment 15th Lerion Se. Inf.
Approved [Signature] 1937
Director
CONFEDERATE DIVISION
STATE DEPARTMENT OF PUBLIC WELFARE

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. Sarah McClellan, 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. Jennie Taylor,
the witness who swears to the ~~validity of 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)

[Signature] 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 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 each 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. Sarah McClellan, 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. Sarah McClellan, Atlanta, Georgia, Fulton County 837 Wyld at S.E.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All of my life
- Give date, or year, of your birth. March 29, 1868 Age? 69
3. (1) When, (2) where and (3) to whom were you married? Nov. 20, 1904, Atlanta, Ga., Mr. Ira P. McClellan
- a. Have you married since the death of first and soldier husband? no
- b. When and where did your first husband die? Atlanta, Ga
- c. Were you residing together when he died? yes
- d. If not, how long had you resided apart? yes
- e. Are you now a widow? yes
- f. Have you or your husband heretofore been paid a pension by the State? Husband has, and drew pension for the balance of year after his death
- g. If so, when and for what cause were you or your husband placed on the roll?

SECTION II.

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

1. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry, 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 was he held and when was he released?

Sworn to and subscribed before me, this the

23 day of July, 1937.
[Signature] Ordinary
of Fulton County.
(SEAL OF ORDINARY)

Mrs. Sarah McClellan
not
Applicant.
witness to mark.
Mrs. Stitude Powell
Mrs. Jennie Taylor

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.

- 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

22 day of July, 1937.
H. J. Kemp, Ordinary
of Fulton County.
(SEAL OF ORDINARY)

Mrs Sarah M. Mclellan
witness to mark.
Mrs Etude Powell
Mrs Jennie Taylor

State of Georgia
Fulton County

To Whom it may concern:

This is to certify that I have known Mrs. Sarah McClellan for thirty-six years, and that she has never married since the death of her husband Mr. Ira F. McClellan, a deceased Confederate Veteran.

Edw. Powell

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

H. J. Kemp
O.C. Ordinary

STATE OF GEORGIA,
FULTON COUNTY.

TO WHOM IT MAY CONCERN:

This is to certify that I have known Mrs Sarah M. Mclellan for 36 years, and that she has never married since the death of her husband, Mr. Ira F. McClellan, a deceased Confederate Veteran.

Sworn to and subscribed before me

This July 22, 1937.

Mrs Jennie Taylor
O. C. O.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. SARAH MCCLELLAN, WIDOW OF IRA H. MCCLELLAN,

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.

L. Thos. "Pat" G. Allen

Director, Confederate Division
State Department of Public
Welfare

Sworn to and subscribed before me Mrs. Jennie C. Taylor
This July 22 1897.
H. T. R.
C. C. D.

L. Thos. "Pat" G. Allen
Director, Confederate Division
State Department of Public
Welfare

Court of Ordinary
FULTON COUNTY
STATE OF GEORGIA

CERTIFIED COPY OF
MARRIAGE LICENSE
AND
CERTIFICATE OF MARRIAGE
OF

MR. IRA F. McQUELLAN
AND

MRS. SARAH C. POWELL

Recorded in Book M Page 407

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 MR. IRA F. McCLELLAN

and MRS. SARAH C. POWELL

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

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 12th day of Nov 1924.

JOHN R. WILKINSON L. S.
Ordinary

I hereby certify that MR. IRA F. McCLELLAN

and MRS. SARAH C. POWELL

were joined together in the HOLY BANS OF MATRIMONY

on the 20th day of Nov 1924, by me.

J. EVINS, J.P.

State of Georgia,
Fulton County.

ORDINARY'S OFFICE

S. S.

ATLANTA, GA. JULY 28, 1927

I, H. T. KEMP Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

MR. IRA F. McCLELLAN

and MRS. SARAH C. POWELL

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.

H. T. Kemp

Clerk, Court of Ordinary.

State of Georgia,

Fulton County.

S. H.

ATLANTA, GA., JULY 26, 1927

I, H. T. KEMP Clerk Court of Ordinary of said County, hereby certify
that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

MR. IRA F. McLELLAN

and MRS. SARAH C. POWELL

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.

H. T. Kemp

Clerk, Court of Ordinary.



Co. C. 34th Reg.
Va. Inf. Regt.
Private May 13th 1862
Hlt Adjt. July 16, 1862

Mr. Clendon Jonathan J.
Fulton County

OK for 1913

Confederate

Soldier's Application.

UNDER ACT 1910.

County Fulton Co.
Name Jonathan J. Clendon
Company Captain Rankland
Regiment 42nd Co
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

THAS. P. BIRD, State Printer, Atlanta.

11/1/12
ENTERED ROSTER OFFICE

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Truett County
 I, *Jonathon M. McCloud* 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).....
Jonathon M. McCloud, 140 Richardson St. Atlanta, Fulton County
2. How long and since when have you been a continuous resident citizen of this State?
May 24th 1910
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
This is present of 34th Va. Regiment
5. How long did you remain in the actual Military Service with said Company and Regiment?
(Give date of discharge) From Organization to close of war
6. When and where was your Company and Regiment surrendered or discharged from the Service?
At High Point, N. C.
7. Were you actually present with your Command when it was surrendered or discharged?
Yes
8. If you were not actually present, state specifically and clearly where you were.....
9. Where was your Command when you left it?
At High Point, N. C.
10. When did you leave the Command?
At close of war, was taken off of High Point, was paroled there
11. For what cause did you leave?
None
12. By whose authority did you leave?
None
13. For how long was your leave granted? In what way?
None
14. Why did you not return to your Command after leave expired?
None
15. In what way were you prevented?
None
16. What effort did you make to return?
None
17. Were you captured during the war?
Yes
18. If so, when, and where? In what prison were you held and when were you released?
Exchange, died, was exchanged
19. 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
20. 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
21. 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
22. What annual or monthly income or earnings of yourself and wife and the source derived have you?
None
23. Are you drawing a pension of any amount from this State or the United States?
None
24. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?
None applied

Sworn to and subscribed before me, this the *20* day of *Sept*, 191*0*, at *Atlanta*, *Fulton* County.

Confederate Soldier's Application.

UNDER ACT 1910.

Name *Jonathon M. McCloud*
 Company *Captain's Regiment*
 Regiment *42nd Ind. Va.*
 Approved

J. W. LINDSEY,

Commissioner of Pensions.

JOHN P. SMITH, SEAL PRINTER, ATLANTA.

RECEIVED

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Fulton County.

A. J. West of said State and County is hereby presented as a witness in support of the application of Alphonse J. M. Chandon 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? A. J. West
Barabuta
2. How long and since when have you known Alphonse J. M. Chandon the applicant? Since 1865 continuously
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? Barabuta, Va. - Bonard
4. When, where and in what Company and Regiment did Alphonse J. M. Chandon enlist during war from 1861 to 1865? (Give date and place) 23rd Va Regiment at Richmond of the war
5. How did you obtain your information of this Service? Learned from him
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) From 1861 to 1865
7. When and where did he surrender or discharged (give date and place) At St. Louis, Mo. April 26, 1865
8. Were you personally present at the Surrender? I was
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 At the surrender Where was his Command when he left it? High Point, Va. for what cause did he leave? Service in
By whose authority did he leave Gen Geo E. Johnston and how long was he granted leave? None How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was present
13. In what way was he prevented from returning to his Command? None How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? No If so, when and where? At St. Louis, Mo. In what prison was he held? None and when released?

Sworn to and subscribed before me, this the

21 day of Oct 1912

John P. Wilkinson Ordinary
of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes A. J. West who on oath says that they are freeholders residing in said County and we know Alphonse J. M. Chandon 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?
6. Was the disposition of this property made in good faith and full value? Yes

Sworn to and subscribed before me, this the 21 day of Oct 1912
John P. Wilkinson Ordinary
of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

John P. Wilkinson Ordinary of said County, certify that I know the applicant Alphonse J. M. Chandon for Pension is the person he represents himself to be and resides in said County. That I also know A. J. West and Wm. H. Chandon the witness swearing to the service and Alphonse J. M. Chandon 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 Return of Alphonse J. M. Chandon shows that Alphonse J. M. Chandon and wife value for tax is in 1908 \$ None for 1909, \$ None for 1910, \$ None

Sworn under my hand and official seal of office this 31 day of Oct 1912.
John P. Wilkinson 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 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 or all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

By whose authority did he leave? John P. Wilkinson and how long was he granted leave? 30 days How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I saw him go

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? How do you know?

15. Was applicant captured as a prisoner? No If so, when and where? at the Bureau In what prison was he held? and when released

Sworn to and subscribed before me, this the

21 day of Oct 1912

John P. Wilkinson Ordinary

of Gaulton County

value for tax is in 1908 \$ None for 1909 \$ None for 1910 \$ None

Sworn under my hand and official seal of office this 31 day of Oct 1912

John P. Wilkinson Ordinary, Gaulton 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.

RECORD O. F. (Mug for)
Mrs. Mary C. McLendon
Fulton Co. Ga.
Dec 1937

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 C. McLendon
 Widow of Moses G. McLendon
 Date of Marriage Sept. 1, 1892
 Date of Husband's Death June 1919
 Company 60th Regt. Inf.
 Regiment 60th Regt. Inf.
 Approved DEC 1 1937
 Director.

State Dept. Public Welfare,
 Atlanta, Dec. 9, 1937.

Moses B. G. McLendon enlisted
 as a private in Co. K,
 60th Regt. Ga. Inf. May 10,
 1862. Captured, Spotsylvania,
 Va., May 12, 1864. Released,
 Elmira, N. Y. June 20, 1865.

Simon O. Chapman
 Director Confederate Records
 Div.

AUG 19 1937

STATE OF GEORGIA.

Fulton COUNTY.

Ordinary's Certificate

I, THOMAS H. JEFFRIES, Ordinary of said County, do certify
 that I know Mrs. Mary C. McLendon, 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. F. W. Burke

the witness who swears to the legitimacy of said 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 1st day of December, 1937.
 (SEAL OF ORDINARY)

Ordinary,
 of Fulton County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall read and explain the following words: "You do solemnly swear that you are the person named in the application and you and the witness you shall give will be the whole truth. So help you God."
2. The Ordinary shall then ask the questions asked you and the witness you shall give will be the whole truth. So help you God."
3. Only persons who were born prior to January 1st, 1920, are entitled to pension.
4. Persons who were born after January 1st, 1920, are entitled to pension only if they were residents of this State at the time of their marriage.
5. Affidavits of marriage must be obtained. If not, prove marriage by some person or by general reputation.
6. Don't use the bulky form of Marriage Certificate in use 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.

State Dept. Public Welfare,
Atlanta, Dec. 9, 1937.

Moses B. G. McClendon enlisted
as a private in Co. K,
50th Regt. Inf., May 10,
1862. Captured, Spotsylvania
Va., May 12, 1864. Released
Simira, N. Y. June 20, 1865.

Director of 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. Mary C. McClendon
Widow of Moses G. McClendon
Date of Marriage Sept. 1, 1892
Date of Husband's Death June 1919
Company 60th Regt. Inf.
Regiment 60th Regt. Inf.
Approved Oct 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. Mary C. McClendon 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. F. W. Burke
the witness who swears to the ~~same~~ 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 25th day of August, 1937.
(SEAL OF ORDINARY) _____ 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, Mary C. McClendon 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).....
Mary C. McClendon, 959 Margaret St. Hapeville, Ga. Fulton County
- How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? Seventy-five years
Give date, or year, of your birth. February 20, 1862 Age? 75
- (1) When, (2) where and (3) to whom were you married?.....
Sept. 1, 1892, Paulding County, Georgia, Moses G. McClendon,
a. Have you married since the death of first and soldier husband? No
b. When and where did your first husband die? June, 1919, Soldiers Home, Atlanta, Ga
c. Were you residing together when he died? Yes
d. If not, how long had you resided apart?.....
e. Are you now a widow? 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?

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.
.....
- 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

25 day of July, 1937.

Thomas H. Jeffries Ordinary

of Fulton County.

(SEAL OF ORDINARY)

Mary C. McClendon
Applicant.

(SEAL OF 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 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.

- 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

23 day of July, 1937.

A. S. Patton, Ordinary

of Fulton County.

(SEAL OF ORDINARY)

Mrs. M. C. McCleendon
Applicant.

STATE OF GEORGIA,
FULTON COUNTY

TO WHOM IT MAY CONCERN:

This is to certify that I have known Mrs. Mary C. McCleendon for forty-three years, and that she has never married since the death of her husband, Moses G. McCleendon, a deceased Confederate Veteran.

Mrs. F. M. Busby.

Sworn to and subscribed before me,
this 23rd day of July, 1937.

A. S. Patton
C. C. Ordinary

STATE DEPARTMENT OF PUBLIC WELFARE

FURT BUILDING

ATLANTA

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

WHEREAS:

MRS. MARY C. McCLENDON, WIDOW OF MOSES G. McCLENDON,

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. T. H. Lillian
Director, Confederate Division
State Department of Public
Welfare

A. H. Allen
Director, Confederation Division
State Department of Public
Welfare

STATE OF GEORGIA

Marriage Certificate

PAULDING COUNTY

This Certifies that MOSES G. MOLENDON,

and MRS. MARY C. HUGHES,

WERE UNITED IN THE HOLY BONDS OF MATRIMONY

By J. A. HOLCOMB, J. P.

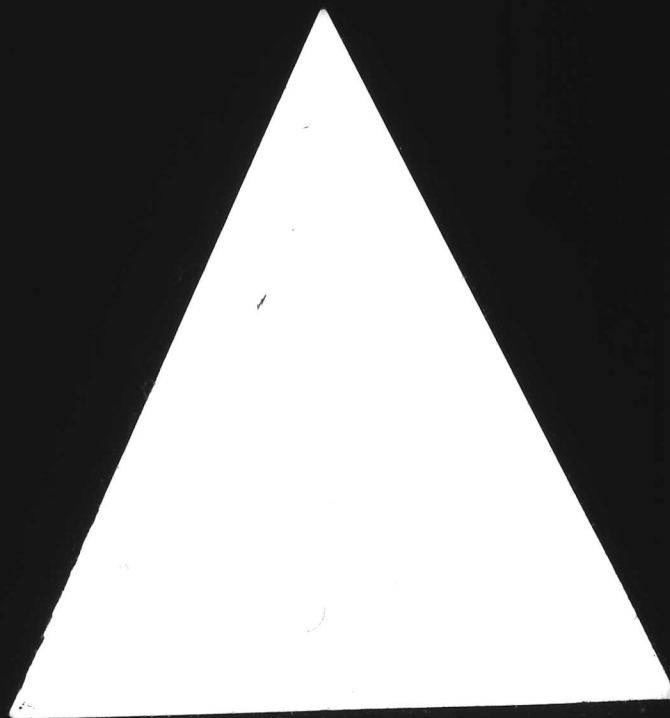
On the 1st day of SEPTEMBER, in the year of our Lord 1932

as appears of record in my office in Marriage Record, book 1891-1906,

page 24. This 5 day of July, 1937

J. S. Bullock
ORDINARY

Form 125.



Ordinary's Certificate

STATE OF GEORGIA,

Fulton

County

I, William R. Lindsey, Ordinary of said County, do certify that I know Eula S. Lindsey 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 believe her to be

that I believe her to be 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 believe her to be

(SEAL)

William R. Lindsey, Ordinary,
Fulton County

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

2. Additional affidavits may be attached if such papers are submitted.
3. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by
4. Attach certified copies of marriage license if available. If not, prove marriage by some persons, or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton
Name Wm. Eula S. Lindsey
Widow of John R. Lindsey
Company A
Regiment La. Cavalry
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co. State Printers, Atlanta.

10-15-1921

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY

I, William R. McLeskey, Ordinary of said County, do certify that I know Eula S. McLeskey 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 she represents herself to be and she is a bona fide continuing resident citizen of said County~~ and she is ~~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, 1921

(SEAL)

William R. McLeskey 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 witnesses 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

No. Fulton County

County Fulton
Name Mrs. Eula S. McLeskey
Widow of James R. McLeskey
Company A
Regiment Co. (Cavalry)
Approved See back

J. W. LINDREY,
Commissioner of Pensions,
Bldg. Pensions Co., State Prison, Atlanta.

10-28-1921

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY
Eula S.

Personally before me comes Mrs. James R. McLeskey 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. James R. McLeskey, Atlanta, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? Since May 21, 1880.
3. When, where and to whom were you married? James R. McLeskey, Bainbridge, Ga., May 21, 1880.
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.) About May 1864, in Company A, Battalion Georgia Cadets; at Marietta, Ga. (From Ga. Military Institute)
6. When and where did the commands of your husband surrender or discharge from the army? Augusta, Ga., May 20, 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?
9. 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?
10. When and where did your first husband die?
 - a. Were you residing together when he died? Yes.
 - b. If not, how long had you resided apart?
 - c. Are you now a widow? Yes.
11. Have you or your husband heretofore been paid a pension by the State? No. but was approved WILKES for 1909, and died before receiving pension. If so, when and for what cause were you or your husband placed on the roll? 1909, Indigency.

Sworn to and subscribed before me this

28 day of Oct, 1921
William R. McLeskey Ordinary
of Fulton County.
(SEAL)

(SEE AFFIDAVIT ON OTHER SIDE.)

State of Georgia,
County of Fulton.

Personally appears *Eula S. McCleskey*, who after being duly sworn, deposes and says that she knows of no one now living by whom to prove the service of her husband, James R. McCleskey, upon which this application for pension is based, this affidavit being made for the purpose of authorizing the Commissioner of Pensions to substitute in lieu of such proof the application made by deponent's husband and approved for payment for 1909, which application is now on file in the Pension Office of said State. *WILKES COUNTY*

Sworn to and subscribed before me, this the *26* day of October, 1921.

William R. Magent
C. C. O.

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

COUNTY.

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

1. What is your name and where do you reside?
2. How long and since when have you known applicant?
3. How long and since when has she continuously resided in this State? (Give date.)
4. When and to whom was she married? How do you know?
5. How long and since when did you know her husband?
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?
- Were they divorced?
9. When, where and in what Company and Regiment did enlist?
10. Were you a member of the same Company?
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment?
12. When and where did his Command surrender, and was discharged?
13. Were you personally present when it was surrendered? If not, where were you and how came you there?
14. Was the husband of applicant personally present at surrender? If not where was he? When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? And how long was he granted leave? How do you know all this?
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

..... day of 19...

Ordinary

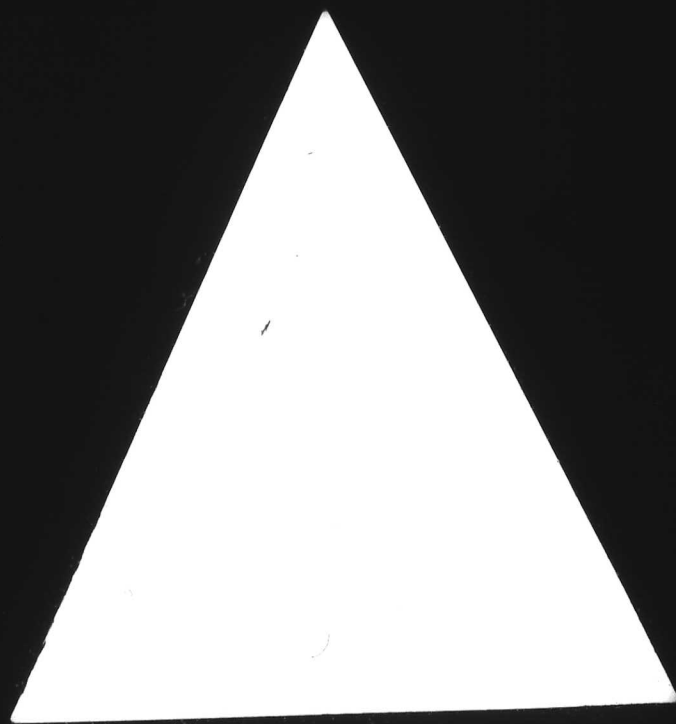
of County.

(SEAL)

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 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 }
..... day of 19..... }
..... Ordinary }
of County. }
(SEAL)

James P. M. L. King
Married
4a
James P. M. L. King
Married 1880
Barnbridge
4a



Ordinary's Certificate

STATE OF GEORGIA

Fulton

COUNTY

I, *J. W. Lindsey*

Ordinary of said County, certify that I know

the applicant, *J. L. McCordum*, for pension in the person he represents himself to be and resides in said county. That I also know *J. L. McCordum* is a *Confederate* soldier.

service; that they are both 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.

Sworn before my hand and official seal of office this *15* day of *Oct* 19*19*

Ordinary

of

County

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You do solemnly swear that you will give answers made to each of the questions asked you and the evidence you give in this case, and that you will not be influenced by any person or persons in giving your answers and evidence." 2. Additional witnesses may be attached if their names are insufficient. 3. All affidavits must be sworn before the Ordinary of the county in which the applicant or witness resides and must be certified by said Ordinary.

McCordum, J. L.
Fulton County

No. *1020*

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County *Fulton*

Name *J. L. McCordum*

Company *D*

Regiment *6th Ala.*

Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-23-1919

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY

I, T. L. D. Spivey, Ordinary of said County, certify that I know the applicant Robert L. McCollum for pension is the person he represents himself to be and resides in said county. That I also know Thos. J. D. Spivey the witness swearing to the service, that they are both 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.

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

Ordinary
County

SEAL

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and 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 give shall be the whole truth. So help you God!"
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

No. 10-23-1919
Confederate
Soldier's Application
Under Act 1910 - As Amended by Act of 1919

County Fulton
Name J. L. McCollum
Company D
Regiment 5th Ala.
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.
Bryce Building Co., State Printer, Atlanta.

Application for Soldier's Pension Under Act 1910

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,

Fulton COUNTY

Robert L. McCollum of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, 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 L. McCollum Atlanta Fulton County
2. How long and since when have you been a continuous resident of this State?
From March 23, 1867, last residence 29 years in Atlanta
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865?
I enlisted at Savannah Ga. April 61
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
Co. B. 6th Ala. Regt.
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge)
April 1861 to April 2, 1865 about 4 years 10 months 14 days
6. When and where, was your Company and Regiment surrendered or discharged from the Service?
Appomattox Court House Va. 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.
In prison at Paul Robeson Ind.
9. Where was your command when you left it?
Richmond Va. 29
10. When did you leave the command?
Captain April 2, 1865
11. For what cause did you leave?

12. By whose authority did you leave?

13. For how long was your leave granted? In what way?

14. Why did you not return to your command after leave expired?

15. In what way were you prevented?

16. What effort did you make to return?

17. Were you captured during the war?

18. If so, when and where? In what prison were you held and when were you released?
Captain April 2, 1865 at Richmond Va. and Charleston prison
19. Are you drawing a pension of any amount from this State or the United States?
No
20. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?
No

Sworn to and subscribed before me, this the

15 day of Oct, 1919
Thos. J. D. Spivey Ordinary
of Fulton County

(SEAL)

Questions for Witness as to Service

STATE OF GEORGIA

Hulton County }
Thompson Carroll

COUNTY

John

of said State and County is hereby presented
as a witness in support of the application of H. W. Callum for the pension provided
by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to
make to the questions propounded, answers as follows:

1. What is your name and where do you reside? Thompson Carroll
Catoosa County Ga
2. How long and since when have you known H. W. Callum the applicant?
Since April 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? At Catoosa
with Mrs. R. K. Wood quarters in Catoosa place Dec 1890
4. When, where and in what Company and Regiment did H. W. Callum enlist during
war from 1861 to 1865? (Give date and place.) C. O. & Co. 1st Regt. Sherman's Tenn
5. How did you obtain your information of this Service? Carroll went home
from April 1861 to Dec 1862
6. How long within your own personal knowledge did he perform actual military service with this
Company and Regiment? (Give date) Continuously from April 1861 to Dec 1862
with Mrs. R. K. Wood Co. & Sherman's Regt. from which he was released
7. When and where was his command surrendered or discharged (Give date and place)?
At Fort Mifflin Pa. April 9 1865
8. Were you personally present at the surrender? No
9. If not, where were you and how came you there? Was in Marion County, Tenn
having resigned from Service
10. Was the applicant personally present with his command at surrender? No
11. If not where was he and how came he there? Was a prisoner of war
12. When did he leave his command? Captured April 27 1865 Where was his command
when he left it? At Fort Mifflin Pa. For what cause did he leave? Captured by enemy
By whose authority did he leave? _____ and how
long was he granted leave? _____ How do you know
all that you have stated to be true? If of your own knowledge, tell clearly and specifically.
13. In what way was he prevented from returning to his command? In prison
How do you know? Information
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? At Fort Mifflin
April 27 1865 In what prison was he held? Paul Johnston and
when released? June 1865

Sworn to and subscribed before me, this the

17 day of Sept 1914Thompson Carroll
Ordinaryof Catoosa County

when released *March 1865*
Sworn to and subscribed before me, this the
14 day of *Sept* 19*14*
Thompson Carroll
of *Fulton* County }
(SEAL)

NAME *McCollum, Jacob L.* YEAR *1880* COUNTY *Fulton.*

WHEN AND WHERE BORN? *Resident of Georgia practically all his life.*

ENLISTED WHEN AND WHERE? *April 1861 at Shellmound, Tenn.*

RANK:

COMPANY AND REGIMENT? *Co. D 6th Alabama Regt.*

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE? *April 2, 1865 At Petersburg, Va.*

RELEASED: *June 1865 from Point Lookout Prison, Md.*

WHEN AND WHERE SURRENDERED? *Command surrendered April 9, 1865 at Appomattox Court House, Va.*

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? *In Prison at Point Lookout, Md.*

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: *Thompson Carroll-----Same Command-----no data.*

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? In Prison at Point
Lookout, Md.

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: Thompson Carroll-----same Command-----no data.

Pension office 11-17-13

Do not find the name of applicant's husband on the indigent pension roll as being paid a pension in 1910 nor at any other date. Pension mistake must state clearly and definitely in what county he resided at his death and when and where he was paid his last pension.

J. W. Lindsey Com of Pensions.

Pension office
6/15-1914

The husband of Julia A. McConnell was on the indigent pension roll as being paid a pension in 1910 nor at any other date. Pension mistake must state clearly and definitely in what county he resided at his death and when and where he was paid his last pension. J. W. Lindsey Com of Pensions.

McConnell, Julia A.

Oct 1915

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 Julia A. McConnell

Widow of J. J. McConnell

Company Transport

Approved _____

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. HYDE, State Printer, Atlanta.

10/3/1913
11/2/1914

Pension office 11-17-13

Do not find the name of applicant's husband on the indigent pension roll as being paid a pension in 1910 nor at any other date. Some mistake, must state clearly and definitely in what county he resided at his death and when and where he was paid his last pension.

J. W. Lindsey Com. of Pensioners.

Pension office
6/15-1914

The husband of applicant was on pension roll as being paid a pension in 1910 nor at any other date. Some mistake, must state clearly and definitely in what county he resided at his death and when and where he was paid his last pension.

James Rael Robinson Co. - who he died Jan 26 - 1911
The applicant is the widow of J. W. Lindsey Com. of Pensioners.

CHAS. P. STEIN, State Printer, ALABAMA.

J. W. LINDSEY,
Com. of Pensioners.

Approved _____
County _____

Witness of J. W. Lindsey _____
County _____

Witness of J. W. Lindsey _____
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WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Fulton County.

Personally before me comes Miss Julia A Mc Connell of said County, who, after being duly sworn, on oath says, that she is the widow of J. W. Lindsey to whom in the County of Fulton State of Georgia she was married on the 15 day of Dec 1911 and that she remained his wife, and resided with him to the date of his death in Dec 26 1911 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 Indigent Pension Roll of the State and paid a pension of \$ 60.00 in Fulton County for 1910 per annum, on account of being a soldier in Company Sharp Artillery Regiment Georgia (Volunteers of State Militia)

At the death of _____ he was in the use and possession of the following 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	\$

That she is now a bona fide resident citizen of said County of _____ and she has so continuously resided since _____ day of _____ 1911

Sworn to and subscribed before me, this the 14 day of Oct 1913 John R. Robinson 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 J. W. Lindsey 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 Julia A Mc Connell who made the foregoing affidavit, is the lawful widow of J. W. Lindsey who died in Fulton County in said State of Georgia on 26 day of Dec 1911 and that she has not since remarried. That she became the wife of _____ on the _____ day of _____ 18 _____ and that she and he had resided together as man and wife continuously since _____ day of _____ 18 _____ and that the J. W. Lindsey was the same man who was on the pension roll of said State from Fulton County _____ when he died.

Sworn to and subscribed before me, this the 30 day of Oct 1913 John R. Robinson Ordinary, of Fulton County.

(Under the Act of August 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 J. C. Patterson
 of said County, who, after being sworn, on oath says
 that he knew Jacob A. Hunt Council of said County, and that said pensioner
 was on the widows Pension Roll of Fulton County at the
 time of death, which occurred in Fulton County, in this
 State, on the 21 day of April 1923, and that
 a Pension of One hundred Dollars was due pensioner and
 unpaid at the time of pensioner's death. That he left no widow or dependent children surviving, and
 no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$253.
 per sworn statement filed and completely itemized hereto attached.)

Sworn to and subscribed before me

this 26 day of June 1923
William R. Maule Ordinary
Fulton County

GEORGIA, *Fulton* County.

I, Thos H. Jeffries Ordinary of said County, do certify
that I personally know F. W. Patterson, who is a resident
citizen of said County, and that said person is of a truthful and trustworthy character, entitled to full
faith and credit.

I also knew Julia Ann McConnelly while in life and that this was the same person whose name appears on the widow's Pension Roll of Tulsa County, and was paid a Pension of One Hundred Dollars in said County for 1922, and

I now believe said pensioner to be dead

Given under my hand and official seal, this

(SEAL)

INSTRUCTIONS

- [illegible]

STATE OF GEORGIA.

Frederick County

Personally before me came J. E. Eilbert who after being sworn on oath says, that they are freeholders of said County, and that they know John A. H. Curren of said County and ~~know her said husband~~ at his death on the day of 191 that she and he were in the use, possession and control of the following property at his death to wit:

of the value of \$ 0 . That she is now in the use, possession and control of the following property to wit: 18 acre and 2 1/2 inch Leonardia Co

of the value of \$ 500.00

Sworn to and subscribed before me, this the

22nd day of October 1913
John R. Wilson Ordinary, J. C. Clark
of Fulton County.

STATE OF GEORGIA.

Fullon County

I, John B. Williams Ordinary of said County, do certify, that, I know Julia A. M. Cornwell 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

That I also know 192. M. Council witness to death and I also know Mrs. J. G. Gubandt 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 faithful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Tulsa County shows that Applicant returned property to the amount of _____ for 1908 \$ none for 1909 \$ none for 1910 \$ 20

Sworn under my hand and official seal of office this 30 day of Oct 1911
(SEAL.) John R. Carson Ordinary.

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
reputable reputation.

INSTRUCTIONS:

1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and died without owing sufficient property to pay such expense. The widow or a sister, if she is living, has your claim over these expenses, and must make application on follow blank.

2nd. Receive these running accounts for expenses of last illness, and expenses of funeral, to make out their account in fully itemized form, giving each item and the value of it, and each date.

3rd. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.

4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unpaid," etc.)

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

5th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached hereto to this blank after this blank has been properly completed as indicated.

6th. The completed voucher, this blank and the bill, must be sent to the Pension Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.

7th. The Ordinary signs pay-rolls as Ordinary, for the pension and then disburses the money himself and takes receipts.

8th. Accept no bills for nursing until you write the Pension Office, stating the circumstances in very great detail.

9th. Pensioner's children, or children-in-law, must not charge the State for doing what the law and common humanity demand of them.

10th. Return this application, and attached bills, with your final settlement to the Pension Office.

11th. Ordinary should say that the back of this blank, when folded, is filed out.

12th. Funeral expenses of deceased "new" pensioners covering all or part of both the 1900 and 1901 pensions require two separate sets of this voucher and bill—one set to be filed in the Pension Office with the pension papers of each year.

ME Connell, Julia Ann (Mrs)
 1928
 Fulton Co. 1921

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)
 (To pay expenses of last illness or funeral)

IT is hereby sworn that _____ Ordinary
 of _____ County

Old or New Class _____
 Died _____ 1923
 Amount \$ 100.00

Approved and ordered paid.
 John W. Bank 6-26 1923
 Commissioner of Pensions.

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

Texas Printing Co., Atlanta, Ga.

This is to certify that _____
 deceased John S. Connell,
 Mrs. Julia Ann Connell, his
 wife, died on _____
 at the County of _____
 State of _____
 and that the above pension was
 in full of all that was due,
 by _____

Mrs Julia A. Connell
 sworn to and subscribed
 before me this 30 day of Dec
 1913
 John W. Bank
 Ordinary

Macon County
State of North Carolina

To Whom it may concern,
I bear by certifying that I have known
Mrs Julia A. McConnell; Widow of
J. A. McConnell Deceased for 44 years. I
practiced as Physician in her Family
over 20 years. Her Husband served in the
Trop. Artillery, Captain Carlton's Battery
of Athens Ga. Mrs McConnell's character
is good.

Respectfully
Signed
A. C. Brabson

Sworn to and subscribed before
me, this Sept. 4th 1913
Lee Crawford
My Comm Expires March 27/14 Notary Public.

Application for Pension Due to a Deceased Pensioner

(Under the Act of August 15, 1904)

To Be Paid to the Ordinary for Funeral Expenses and Expenses of Last Illness.

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes J. W. Patterson

of said County, who, after being sworn, on oath says
that he knew Julia Ann McConnell of said County, and that said pensioner
was on the widows Pension Roll of Fulton County at the
time of death, which occurred in Fulton County, in this
State, on the 21 day of April 1913, and that
a Pension of One Hundred Dollars was due pensioner and
unpaid at the time of pensioner's death. That he left no widow or dependent children surviving, and
no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$253.¹⁸
per sworn statement fully and completely itemised, hereto attached.

Sworn to and subscribed before me
this 26 day of June 1913
William R. Vaught Ordinary
Fulton County.

AFFIDAVIT OF ORDINARY

GEORGIA, Fulton County.

I, Thos H. Jeffries Ordinary of said County, do certify
that I personally know J. W. Patterson, who is a resident
citizen of said County, and that said person is of a truthful and trustworthy character, entitled to full
faith and credit.

I also knew Julia Ann McConnell while in life and that this
was the same person whose name appears on the widows Pension
Roll of Fulton County, and was paid a Pension
of One Hundred Dollars in said County for 1912, and
I now believe said pensioner to be dead.

Given under my hand and official seal, this 26 day of June 1913
(SEAL) Thos H. Jeffries Ordinary
Fulton County.

INSTRUCTIONS.
1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months,
and died without leaving sufficient property to pay this bill. The widow or a son, if she is living, has prior claim
over these expenses, and must make application on yellow blank.
2nd. Repay these claims accounts for expenses of last illness and expenses of funeral, to make out their account
in fully itemised form, giving each item and the value of it, and each date.
3rd. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner
grew worse to die.
4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "last, true,
due, unpaid," etc.)
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may
be) of Julia Ann McConnell, who died without leaving sufficient property to pay this bill."
5th. The Ordinary must see that the back of this blank is properly completed as indicated.
6th. The completed voucher, this blank and the bill, must be sent to the Pension Office for approval and no money
must be paid out until it is returned to you as your authority to make the payment.
7th. The Ordinary signs pay-roll as Ordinary, for the pension and then disburses the money himself and takes receipts.
8th. Accept no bill for services until you write the Pension Office, stating the circumstances in very great detail.
Pensioner's children, or children-in-law, must not charge the State for doing only what the law and common humanity de-
mand of them.
9th. Return this application, and attached bill, with your final settlement to the Pension Office.
10th. Ordinary should see that the back of this blank is filled out.
11th. Funeral expenses of deceased "new" pensioners covering all or part of both the 1909 and 1911 pensions require two
separate sets of this voucher and bill—one set to be filed in the Pension Office with the pension papers of each year.

Wm. M. Lindsay
Commissioner of Pensions
Atlanta, Ga.

Atlanta, Ga.,

Jan. 20, 1915.

Mrs. Cora H. McConnell,

Mt. Airy, Ga.

Dear Madam:-

Replying to yours of recent date will say, that by reference to my docket I find that Mrs. Julia A. McConnell, widow of J. J. McConnell of Troup's Artillery, was applicant for pension, and filed first in this office Oct. 31, 1913. It was then returned for amendment and then refiled here Jan. 12, 1914, and was passed on and approved for the rolls of 1915. That is all that is to be done in regard to the matter now.

I recall some correspondence with you quite awhile ago, but do not remember just what subject. If Mr. Paton thinks he can secure this pension for 1913 and 1914, that will have to be done by resolution of the Gen. Assembly, for we have no funds of those years at my disposal.

Yours respectfully,

Commissioner of Pensions.

Toccoa Record Correspondence.

Write plainly, and on but one side of this sheet.

Write the news of your own neighborhood only. Leave the happenings of another locality for another correspondent.

Use discretion as to what is REAL news. If "Mrs. Smith" or "Mr. Jones" simply called on their nearest neighbor, that is NOT news, for it is an every-day occurrence. Don't send such items. Give particulars of all fires, accidents, marriages, deaths, etc.

Be sure to leave ONE BLANK LINE between each item. PLEASE don't neglect this.

Write every other week, and mail on MONDAY—NOT LATER.

Mount Airy, Ga.
Sep-16/14-15
Hon. Jas. M. Lindsay.
Atlanta, Ga.
Dear Sir:-
My mother, Mrs. Julia A. McConnell of Atlanta who is now visiting me in person me that she has not yet rec'd her pension.
Will you please tell me the cause of this delay?
Her papers in application for pension were presented acceptably to the ordinary Milton, Ga. who in turn advised her to give them to you which she did through your agency in Ga.

Yours respectfully,

Commissioner of Pensions.

which I did through
your agency.

She established the fact that my father was a confederate soldier enlisted in troop or battery in Athens under Capt. W. H. Carlton. In his company were such men as the late N. A. Thompson &c. He served through the war, doing valiant service to his country until seriously wounded in the battle of Gettysburg, when he was unable for service and was honorably discharged. He never altogether recovered from this service, making life for my mother and children often very hard to meet the actual necessities. In later years of his life against the earnest wishes of his entire family he chose to go to the Soldier's home where he died. All this has been established. My mother established the fact

Toccoa Record Correspondence.

Write plainly, and on but one side of this sheet.
Write the news of your own neighborhood only. Leave the happenings of another locality for another correspondent.
Use discretion as to what is REAL news. If "Mrs. Smith" or "Mr. Jones" simply called on their nearest neighbor, that is NOT news, for it is an every-day occurrence. Don't send such items. Give particulars of all fires, accidents, marriages, deaths, etc.
Be sure to leave ONE BLANK LINE between each item. PLEASE don't neglect this.
Write every other week, and mail on MONDAY--NOT LATER.

that she was his lawful wife and we children can testify to further information. My mother has placed the matter in my hands to investigate. I hope the amount due for the past may be secured without further trouble to me and that future pay ment may be prompt.

Will you please go into this matter at once as my mother needs this very much.

Very Respectfully-

Mrs. Anna M. Connell.

Mrs. Laura McConnell.

My dear Sir:-
I gather from your
indecision about my father's
enlisting in a N.C. Reg't. that
you have corresponded another
with ^{of the same initials but}
a different name. My father in law
Joseph. Indam. McCornell is the
soldier who ^{in 1862 for 2, my father,}
John. Jefferson, ^{was enlisted with.}
Capt. W. H. Cardillo from Athens as
I wrote you, died at the Soldiers
Home Dec. 26. 1911 - was buried in
Newbern. Joseph. Indam. McCornell
died Feb. 21. 1909 in Mount Airy Ga-

When you consider these facts and
investigate rather from this
stand point, you will find my
mother's application has been
filed correctly, and joined to
her application is an affidavit
from her physician, as I wrote you -
my mother suffered many privations
and exposures because of my father's
nervous and excessive, thereby
causing her now to suffer from this
over exertion. Her health is very poor,
not being able to work and under
the care of a physician continually.
She was compelled to borrow money to
meet her obligations trusting she would
receive her pension at the regular time.
This delay is giving her considerable
anxiety which in itself makes her

Horne Dec 26. 1911- was buried in
Newtown Joseph H. Judson. M. Cornell.
died Feb. 21. 1929 in Mount Airy. Ga-

receive her pension at the regular time.
This delay is giving her considerable
anxiety which in itself makes her

very depressed and unhappy.
She trusts that she may receive
\$150.00 for last year at once, as
she can not meet her payment.
She feels that this is just and
she deserves it after all those
years of privation and
hard work.

Very Respectfully
Mrs. Anna M. Cornell-

Jun. W. Lindsay,
Commissioner of Pensions.
Atlanta, Ga.

Atlanta Ga.,
Sept. 16th 1914.

Mrs. Cora McConnell,

Ut Airy, Ga.

Dear Madam:-

Replying to yours of recent date in reference to your mother's application for pension, will say that your mother's application as now filed in this office, has been disapproved for that she claims in her application that your father, J.J. McConnell belonged to the Troop Arty of Georgia, when in fact, he was allowed upon his application for a disable pension, as belonging to company "A" Thomas' Legion of N.C. Infy. Therefore your mother cannot be allowed a pension for the service that she claims for him, in a different and separate command, than that to which he says he belonged.

I enclose you herewith a blank that you can have your mother fill out, stating specifically the service of her husband, J.J. McConnell, when he enlisted, the company he enlisted in by letter and regiment or Legion, and when and how he got out of that service, and prove this to be true by someone who knows that he performed the service as stated by her, then she must swear to the same before the Ordinary of Fulton County, and the witness who is to testify to your father's service, must swear to his testimony before the Ordinary or Probate Judge of the county where he

Jun. W. Lindsay,
Commissioner of Pensions.
Atlanta, Ga.

resides. This must be done and sent to this office on or by the 1st day of Nov. next, that it may be passed on for the rolls of 1915.

Yours respectfully,

Commissioner Of Pensions.

Geo. W. Kindberg
Commissioner of Pensions
Atlanta, Ga.

Atlanta Ga.,
March 17th 1915.

Hon. J.M. Slaton,
Atlanta Ga.,
Dear Sir:-

I have written to Mrs. Cora McConnell in reference to her last letter to you, a copy of the letter I attach herewith.

When her mother's application was made and filed in this office October 31st 1913, it was stated in that application that Mr. McConnell was on the indigent pension roll of Fulton County and that he died in Fulton County Dec. 1912. When I came to pass on the application I had a search of the pension rolls of Fulton County, and the name of her father could not be found thereon, so I returned the application on Nov. 17th 1913, stating in my note thereon the fact that her husband's name could not be found on the indigent pension roll of Fulton County, and that she must amend her application and state, when and where he drew his last pension, and when and where he was placed on the pension roll.

Mrs. McConnell amended her application and stated that her husband had been placed on the rolls of Habersham County, and that he drew his last pension 1910 and was sent to the Soldier's Home from Habersham County and died there in 1912.

Geo. W. Kindberg
Commissioner of Pensions
Atlanta, Ga.

When we looked to Habersham County we not only

found one J.J. McConnell, but there had been two, one died some years ago, and the J.J. McConnell that had recently died claimed to have been with Thomas, Legion of NYC Troops, and Mrs. McConnell claimed that her husband was of Charlton's Bat. Co. Arty., so there being a conflict in the service, I disapproved the application June 18th 1914 for want of the identity of the service,

In September 1914 Mrs. Cora McConnell came into the investigation, and she informed me and furnished the facts showing the distinction between the two J.J. McConnells that were on the pension roll of Habersham County, and the record that I had intended for J.J. McConnell, was not the record of the husband of Mrs. Julia McConnell, so based on the facts from that point of view, I revoked the order disapproving it, and approved it for the rolls of 1915, and so informed Mrs. Cora McConnell at the time, that we had no funds out of which to pay any application, that I could approve then for 1914.

Yours respectfully,

County, and that he drew his last pension 1910 and was sent to the Soldier's Home from Habersham County and died there in 1912.

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

Atlanta Ga.,

September 22d. 1914.

Mrs. Cora McConnell,
Mt. Airy, Ga.

Dear Madam:-

Your recent letter of the 18th pertaining to the application for pension of Mrs. J.J. McConnell received. I note what you say in reference to the names of the two McConnells on the pension rolls, they stand on the pension roll each of them as J.J. McConnell, and she applied for pension as the widow of J.J. McConnell reciting the fact that he drew his last pension in Fulton County and died in Fulton County, and your previous letter you stated he where he was on the pension roll from, and we located him in Cornelia Habersham County. Therefore I find J.J. McConnell as belonging to Thomas Legion in N.C. Troops. Now, when you come back again, in reply to my last letter, you ^{state} ~~make~~ no reason as to why he did not live and die in Fulton County, and I searched diligently over the rolls, and I find that there was another J.J. McConnell of Troops Arty., placed on the Indigent pension rolls of Habersham County in 1902, and that he went to the soldier's Home from that County in 1907, in which place you say, he died Dec 26th 1911.

I presume that this is the man, although it appears in the application, that he signed it Jno. J. McConnell

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

--2--

So you can well understand when people make their applications so indefinite as to the statements of facts, the material to locate the person and the names who they claim to be the ^{widows} ~~widows~~ of, that it is difficult for us to locate them.

Assuming that your mother is the true widow of Jno. Jefferson McConnell, the one placed on the the rolls from Habersham County 1902, and that he is the one that died in the Soldier's Home 1911, I will approve her application for 1915.

Yours respectfully,

from that county, in 1867, in which place you say, he died Dec.

26th 1911.

I presume that this is the man, although it appears in the application, that he signed it Jno. J. McConnell

✓
Mount Airy Ga.

1-18-1915

Hon. Mr. M. Lindsey
Atlanta Ga.

My dear Sir:-

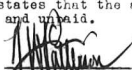
Since our congressman
Hon. Jno. S. Payton went over the
matter of securing for my
mother, Mrs. Julia A. M. Council
of Atlanta the pension due her
in 1913, we had hoped this
would not be delayed longer
as Mr. Payton seemed very much
encouraged after seeing you for
me. My mother who has long ago
returned to her home in Atlanta
writes me again urging me to
take up the matter now, as she
needs this cash money very much.
Her notes that I presumed payment
has now fast due and owing
to conditions of banks everywhere

②
This note cannot be renewed and
we are pressed for payment.
Owing to mother's very poor health,
this only aggravates her very
serious condition. Drs. Campbell
and Dorsey will testify to this
condition. I would not insist on
this, but nothing is more just.
It is just like an unpaid
debt to a widow. Unless it
is paid very soon I will be
compelled to take it up with
the Governor and if necessary
will take it to the legislature
at its coming session.
I regret that this matter has
not received the attention due
it by you.

Please attend to this
most important matter at
your earliest convenience.
Very Respectfully
Jno. J. McConnell

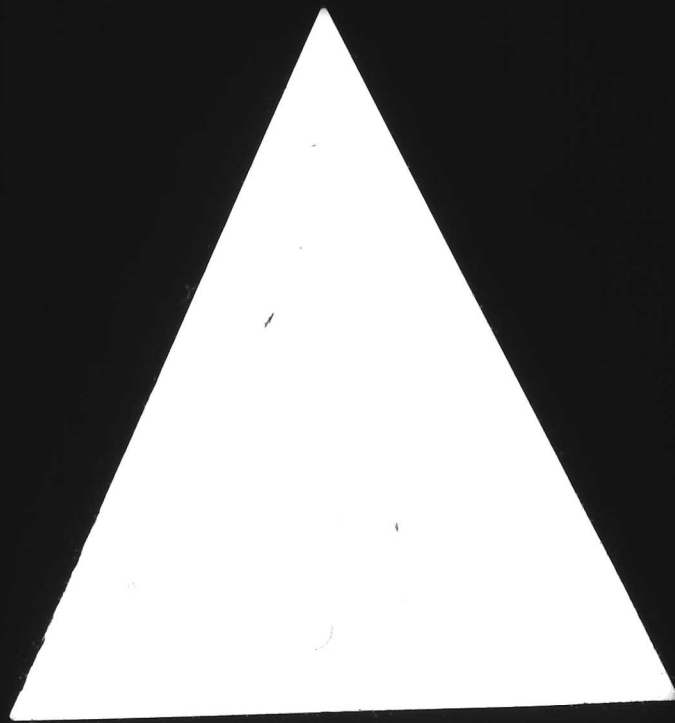
Uncle, my again saying me to
 take up the matter now, as she
 needs this cash money very much.
 Her notes that I presumed payment
 for are now fast due and owing
 to conditions of banks everywhere

not received the attention due
 it by you -
 Please attend to this
 most important matter at
 your earliest convenience
 Very Respectfully
 Wm. H. M. Council

H. M. PATTERSON		Established 1880		FRED'N. W. PATTERSON	
CHapel FLOWERS		H. M. Patterson & Son Funeral Directors 96 North Forsyth St. Atlanta, Ga. Joining Carriage Library		LIMOUSINES AMBULANCES	
Sold to Mrs. Julia Ann McConnell, Estate		April 21, 1923.			
	Metal Lining Casket and box Embalming Constitution notice Georgian notice Journal notice Truck for box Grave and lining Motor flower car Motor Hearse	195 15 4 2 2 3 10 6 15	14 52 52 50	253	
Fulton County, Georgia. Personally appeared before me F. W. Patterson, who on oath states that the above account is correct, due and unpaid.  Sworn to before me this May 29, 1923. <i>Longest Patterson, 210</i> <i>5th St. N. W. at S. W. 2nd</i>					

Sworn to before me this day 29, 1923.

Longest [illegible] [illegible]



App. Rich Johnson
Mr. Comm. of Ind.
No. 752
Fulton Co.

INDIGENT PENSION
1895.

Name *Mr. W. C. Camell*

County *Fulton*

A. J.

July 9 96

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

App.

Geo. W. Harrison, State Printer, Atlanta.

Ex. Dept.
App. cam.
will assign to you
hon. 1st

Rich Johnson

Ex. Dept. 30 Sept 1895.
The within pension appli-
cation is this day approved

Rich Johnson
Sec. Ex. Dept.

STATE OF GEORGIA,
County, }

POWER OF ATTORNEY.

I, _____ of _____

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

Executed in presence of _____

by _____

hereby authorize

STATE OF GEORGIA.

County.

1.

hereby authorize

15

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

48

lv

Witness my hand and seal this

day of

1896.

Executed in presence of

Ex. Dpt. 23 Oct 1895
 Appl. com. will made
 full answer & ques-
 tions 1 part 2
 R. B. Johnson
 Ex. Dpt. 30 Sept 1895
 The matter herein affe-
 cation is this; any appro-
 priation - Ride of Johnson
 See R. Dpt.

Apple Rick Johnson
Ms Connally, Victoria

No. 75-2
Fulton Co.

INDIGENT PENSION

1895.

Wm. Wells & Co. small.

Fullon

A. J.

Aug 9 96

RICHARD JOHNSON,

Secretary Executive Department,

EXHIBIT HANDLED TO

Geo. W. Harrison, State Printer, Atlanta.

QUESTIONS FOR APPLICANT

STATE OF GEORGIA

Fullen

County.

County.)
William M. Cannon

of said State and County, desiring

to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office) William H. Grimes 112 Cambridge Street, Northampton, Massachusetts
2. Where did you reside on January 1st, 1864, and how long have you been a resident of this State? 47 Mine Place, Northampton, a resident all of life
3. When and where were you born? In Northampton Mass. 1816
4. Did you volunteer in the Confederate Army or in the Georgia Militia? In the Confederate Army
5. When and where did you enlist? In Northampton, Mass. in 1861
6. In what company and regiment did you enlist? Co. B 25th Mass. Inf.
7. How long did you remain in that company and regiment? March Feb. 1862
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? Transferred to Company C Co. I Major Chas. W. Bullock
9. For how long a period did you discharge regular military duty? About 16 months
10. When, where and under what circumstances were you discharged from service? In Feb. 1862, at Northampton in accordance with orders from the War Dept.
11. What is your present occupation? Bridge Builder
12. How much can you earn per annum by your own exertions or labor? About \$1000
13. What has been your occupation since 1865? Bridge Builder
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? \$1000 income, One hundred dollars
15. What is your present physical condition and how long have you been in such condition? 40 years of age, slight, disabled shoulder & left hand
16. Upon any of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Age, poverty, infirmity
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? For the last 10 years or thereabouts

[illegible]

18. What property, effects or income do you possess? *None*

19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *nothing in 1893, in 1894 I sold a lot of land for \$1000.00*

20. In what County did you reside during those years and what property did you then return for taxation? *Miller County, in Hancock & my children*

21. How were you supported during the years 1893 and 1894? *by my children*

22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *about \$100.00 contributed nothing*

23. What was your employment during 1893 and 1894? What pay did you receive in each year? *In 1893 about \$50. in 1894 nothing*

24. Are you married and have you a family? If so, in what city living and how many children have you? *Residing in Hancock, Va. 2 boys and 2 girls*

25. Give the sex and age of children and their means of support? *Am Arthur, 10 years old, and 2 girls, 8 and 6 years old*

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

None

Sworn to and subscribed before me this the

26 day of March 1895.

M. L. Lachman Ordinary

of Fulton County.

William McConnell Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton County.

John A. Bridwell of said State and County, having been presented as a witness in support of the application of William McConnell 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? John A. Bridwell 120 Mangum Street Atlanta, Ga.
2. Are you acquainted with William McConnell the applicant, if so how long have you known him? Since 1887
3. Where does he reside, and how long has he been a resident of this State? Atlanta, Ga. All of his life.
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I was with him in same Company in Confederate Regiments.
5. When, where and in what company and regiment did he enlist? Co. H 1st Confederate Reg.
6. Were you a member of the same company and regiment? Yes.
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? He was discharged Co. H 1st Reg. He made up a new Co. August 1864. He was discharged at the time of the surrender of his discharge.
8. What property, effects or income has the applicant? (Give your means of knowledge.) None, subsists as a gentleman and a soldier.
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? Very little of any in either year.
10. What is the applicant's occupation and physical condition? Discharged by trade He is old & infirm.
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is not because of age & infirmities.
12. How was he supported during the years 1893 and 1894? Dependent upon his children.
13. What portion of his support for these two years was derived from his own labor or income? None he sent to any family.
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is 79 years old, has dislocated shoulder & loss of use of left hand and is generally decrepit.
15. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this the 26 day of March 1895.

M. L. Lachman Ordinary

William McConnell Applicant
J. A. Bridwell

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me Ely Griffin and
Arch. Henry, both known to me as reputable physicians

of said county, who being severally sworn, say on oath that they have examined carefully William McConnell applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows: The reaction of the left scapula, or shoulder blade, which rendered the left arm almost useless, the arm being almost paralysed. His age 79 years & accumulated injuries and reaction from war of 1861-1865.

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 26 day of March 1895.

M. L. Lachman Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, M. L. Lachman, Ordinary in and for said County, hereby certify that the applicant William McConnell 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: John A. Bridwell, E. Griffin & Arch. 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 hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same were signed.

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1893, two hundred dollars of property, and in 1894, no thing dollars of property.

Witness my hand and seal of office, this 29 day of March 1895.

M. L. Lachman 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."

Sworn to and subscribed before me, this
the 26th day of March 1896.
W. L. Cochran
Ordinary

William McConnell
J. A. McDermott

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton County.

I, William McConnell, hereby authorize W. L. Moore
of Fulton County

to receive and receipt for the pension paid hereon and request that he remit same to
myself by himself
at his office 48 N. Broad St., Atlanta, Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 8th
day of January 1897.

Executed in presence of

A. P. Hemmingham
A. P. Hemmingham

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 _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of _____ 1898.

Executed in presence of

[L. S.]

McConnell, William
Fulton Co

ACT OF 13 DEC. 1894.
(For Those Already Enrolled.)

No. 67

INDIGENT

Soldier's Pension.

1897.

Name Wm McConnell
County Fulton.

1897.
Jan 11

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDSD TO

at by

W. L. COCHRAN, CLERK OF SUPERIOR COURT.

W. L. COCHRAN

McConnell, William
Fulton Co

ACT OF 13 DEC. 1894.

(For Those Already Enrolled.)

NO. 399

INDIGENT

SOLDIER'S PENSION,

1898.

Name Wm McConnell
County Fulton.

WARRANT ISSUED

1/12 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDSD TO

at by

W. L. COCHRAN, CLERK OF SUPERIOR COURT.

W. L. COCHRAN

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *Wm McConnell* 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 *2* day of *Nov* 18*66*; that he is *80* 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 a Company *of 6th* *Regiment* of *Volunteers*

that his physical condition is as follows: *From age & infirmity, being broken down in health by weight of years & unable to perform any kind of manual labor*

that his property consists of the following items: *Nothing, either real or personal, except his personal apparel, furnished by relatives*

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

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

Sworn to and subscribed before me, this, the *10th* day of *Jan* 1897.

Wm McConnell Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this *6* day of *Jan* 1897.



Ordinary *Fulton* County.

NOTE—The blank space must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *Wm McConnell* 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 *2* day of *Nov* 18*66*; that he is *81* years old and by occupation a *Contractor*; 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 a Company *of 5th* *Regiment* of *Volunteers*

that his physical condition is as follows: *Old age. 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 1898. I have heretofore as a resident of *Fulton* county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the *10th* day of *Jan* 1898.

Wm McConnell Ordinary.

State of Georgia,

Fulton County.

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

Given under my official signature and seal, this *6* day of *Jan* 1898.



Ordinary *Fulton* County.

NOTE—The blank space must be filled.

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 20.

INDIGENT

SOLDIER'S PENSION,
1899.

Name *Wm. McConnell*
County FULTON

WARRANT ISSUED

1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

app. A

Gen. W. Harrison, State Printer, Atlanta.

CODE SEC. 1284.

(For Those Already Enrolled.)

NO. 92

INDIGENT

SOLDIER'S PENSION,
1900.

Name *Wm. McConnell*
County

WARRANT ISSUED

1900.

JOHN. W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

app. A

Gen. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

hereby authorize

of

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

at

by

Witness my hand and seal this

day of 1899.

Executed in presence of

(L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

hereby authorize

of

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

at

by

Witness my hand and seal, this day of 1900.

[L. S.]

Executed in presence of

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
FULTON County.

Personally appears Wm McConnell 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 2 day of Nov. 1876; that he is 82 years old and by occupation a Contractor; 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 mo in Company 5th of 5th Regiment of Georgia; 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 1899. I have heretofore as a resident of _____ FULTON county been allowed a pension for the year 1895.

Sworn to and subscribed before me, this, 11th day of January 1899.

Wm McConnell Ordinary.

State of Georgia,
FULTON County.

I, W. H. HULSEY,

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

Given under my official signature and seal, this 11th day of January 1899.



Ordinary FULTON County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
FULTON County.

Personally appears Wm McConnell 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 2 day of Nov. 1876; that he is 83 years old and by occupation a Contractor; 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 _____ in Company _____ of 5th Regiment of Georgia; 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 1900. I have heretofore as a resident of _____ county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, 11th day of January 1900.

Wm McConnell Ordinary.

State of Georgia,
FULTON County.

I, _____

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

Given under my official signature and seal, this 11th day of January 1900.



Ordinary FULTON County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, *Mr. McCumell* hereby authorize
Mr. L. E. Graham of *Wilkes*

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

at

by

Witness my hand and seal, this *10* day of *January* 1901.

[L. S.]

Executed in presence of

William H. Commell
John R. Wilkeson
William

Mr. McCumell
Mr. L. E. Graham
Mr. Wilkeson

(For Those Already Enrolled.)

No. *884*

INDIGENT

SOLDIER'S PENSION.
1901.

Name *Mr. McCumell*
County *Fulton*

WARRANT ISSUED

1901

JOHN W. LINDSEY,
Comptroller of Pensions.

WARRANT HANDED TO

Mr. Graham

John W. Lindsey, Comptroller of Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Aulton County.

Personally appears *Wm McCannell* of *Fullon* County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the *2* day of *Nov* 18*76*; that he is *24* 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 *18* months in Company *1st* of *5th* Regiment of *Volunteer Cavalry*; that his physical condition is as follows:

aid. General disability

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the *14* day of *May* 1901.

John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Aulton County.

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

Given under my official signature and seal, this *14*

day of *May* 1901.



John R. Wilkinson Ordinary *Aulton* County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, *Wm McCormell* hereby authorize *Mrs L E Gresham*
(*my daughter*) of *Atlanta Ga*

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

myself at *Atlanta Ga*

by *Jan 14-02*

Witness my hand and seal, this *13* day of *January* 1902.

William McCormell

Executed in presence of

Wm Simmons

Fulton Co Ga

McCormell William
Fulton Co

OUR ENTOR IN.
(FOR THOSE ALREADY ENROLLED.)

No. *68*

INDIGENT
SOLDIER'S PENSION
1902.

Name *Wm McCormell*
County *Fulton*

Regiment
Co. *2nd 5th Bata*

WARRANT ISSUED

1902

414

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Mrs L E Gresham
Jan 14-02

John W. Lindsey, Prisoner, Atlanta.

Mrs Gresham

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears

Wm McConnell 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 1st day of Jan 1866, that he is 32 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 year in Company 1 of 1st Regiment of Voltege Command; that his physical condition is as follows:

Genl Substitute

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 1901

Sworn to and subscribed before me, this the

10th day of Dec 1902

Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John A. Wilkinson

Ordinary of said County,

do certify that I am well acquainted with Wm McConnell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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,
Fulton County.

Ordinary.

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

POWER OF ATTORNEY.
STATE OF GEORGIA.

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 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 Government, 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.

Executed in the presence of us:

Said money to me as follows, by _____

_____ to _____
County, Georgia.

P. O.

*McCowan Thomas A.
Hulton Co*

1893.

Hulton
Monroe Co 1892

No. 2110

Application for Allowance

For the Year Ending October 26, 1892.

Thomas A. McCowan
Applicant, *Su. Am.*

County, *Hulton Georgia*

Amount, *Twenty \$ of*

Date of Warrant, *3/16*

Entered on record, *3/16*

COAH

Secretary Executive Department.

WARRANT HANDED TO

McCowan

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Hall County, }

PERSONALLY appears Thos. G. McLowen of Hall 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 August, 1862; 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 53rd Regiment of Georgia Volunteers, Samuel's Brigade; that whilst engaged in such military service at the battle of Friedmanburg in the State of va, on the 13th day of December, 1862, he was wounded as follows:

One shot wound of left forearm, causing loss of use from resulting torn left arm and hand substantially and essentially useless

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 Five dollars, for 1892

Sworn to and subscribed before me, this, 16th day of March, 1893. Thomas G. McLowen

W. L. Leachman County

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

STATE OF GEORGIA, }

Hall County, }

I, W. L. Leachman Ordinary of said County, do certify that I am well acquainted with Thos. G. McLowen 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 affidavit was made and power of attorney was signed is a Justice of the Peace of said County, and the said affidavit and signature thereto are genuine.

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

W. L. Leachman Ordinary Hall County.

RECORDED
BOWEN & CO. CLERKS

I, M. L. Lealman Ordinary of said County,
do certify that I am well acquainted with Thos. G. McLean the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this County.

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

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

M. L. Lealman
Ordinary Hallam County.

STATE OF SIOUX
COUNTY OF ALLOE MEAT

4 Fill out the back of the application carefully.

RECEIVED
MAY 22 1935
VETERAN'S SERVICE OFFICE
A. L. HENSON, Director

APPROVED
For 1935
CONFEDERATE
SOLDIER'S APPLICATION
Under Act of 1910, as Amended by Act of 1919, and Constitutional Amendment of 1920.

County Fulton
Name Benjamin Franklin McCoy
Company G. S. Co.
Regiment 19th
Approved _____

JOHN W. CLARK
Commissioner of Pensions

Enrolled

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, John W. Clark, Ordinary of said County, certify that I know Benjamin Franklin McCoy, the applicant for pension; that he is the person he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know _____ the witness, who swears to the service; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavit, and they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 20 day of Oct 1934.

(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 give shall be the whole truth. So help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
- All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
- Fill out the back of the application carefully.

APPLICATION FOR PENSION BY A SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Fulton COUNTY.

Personally appears before me, Benjamin Franklin McCoy 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 County and Post Office) Benjamin Franklin McCoy, 763 Marietta Place, Atlanta, Georgia.
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All my life, for the past 87 years.
- Did you enlist in the Army of the Confederate States, or in the organized militia, of this State from 1861 to 1865? Confederate States Army August 1862.
- When and where, and in what Company and Regiment did you enlist? (State the arm and class of service, and give name of Colonel and Captain.) Company A, 19th Regt., Infantry, "Irish Company, enlisted at Kennesaw.
- How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge.) About 2 years.
- When and where was your Company and Regiment surrendered or discharged from the Service? Greensboro, N. C.
- Were you personally present with your Command when it was surrendered or discharged? No. I was at home wounded.
- If you were not actually present, state specifically and clearly where you were See answer to Question 7.
- Where was your Command when you left it? Kennesaw
- When did you leave the Command? April or May, 1864.
- For what cause did you leave? Wounded.
- By whose authority did you leave? Officers.
- For how long was your leave of absence granted? In what way? 3 months furlough.
- Why did you not return to your Command after leave expired? On furlough, extended.
- In what way were you prevented?
- What effort did you make to return? Was on wounded furlough.
- Were you captured by the enemy at any time? No.
- If so, when, and where? In what prison were you held and when were you released?
- 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? If so, for what cause was it not allowed? No.

Sworn to and subscribed before me, this the

10th day of October 1934.

Benjamin Franklin McCoy, Ordinary

of Fulton County

(SEAL OF ORDINARY.)

Applicant.

B. F. McCoy

763 Marietta Place

Call for letters
over 2.8.1935.

I had a brother in the crew. I saw James Nicolson who is mentioned
in the Nicolson Papers and was that party to the account
given by the Nicolson Papers; and so we were in the ship
from the 11th of March up to the 15th of March.

.....*Quinton*..... COUNTY.
Cliff Thayer & Co.

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

1. What is your name and where do you reside? *William R. Hinkle Jr. 137 1/2 S. ...*
2. How long and since when have you known *William R. Hinkle Jr.* the applicant?
since 1952 or 1953
3. Where does he now reside, and since when has he been, continuously, a bona fide resident of this State, and how do you know? *137 1/2 S. ...*
4. When, where and in what Company and Regiment did *William R. Hinkle Jr.* enlist (Give date and place) *1952 ...*
5. How did you obtain your information of this service? *...*
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give dates). *...*
7. When and where was his Command surrendered or discharged? (Give date and place). *...*
8. Were you personally present when it was surrendered?
9. If not, where were you? *...* and how came you there?
10. Was the applicant personally present with his Command when it was surrendered?
11. If not, where was he? *...* and how came him there?
12. When, where and for what cause did he leave his Command? (Give date.) *...*
- By whose authority did he leave his Command?
and how long was he granted leave? *...* How do you know all that you have stated to be true? If of your own knowledge, state clearly and specifically *...*
13. In what way, if you know of your own knowledge, was he prevented from returning to his Command? (State clearly and specifically.) *...*
14. What effort did he make to return to his Command and how do you know this? *...*
15. Was applicant captured as a prisoner? *...* if so, when and where? *...*

Sworn to and subscribed before me, this the
 14 day of May, 1924
 Frank J. Brown, cc Ordinary
 of Shelton County

Witness

(SEAL OF ORDINARY.)

Jan. 9th 1935.

Rev. Benj. F. McCoy,
763 Marietta Place, N. W.,
Atlanta, Ga.

Dear Mr. McCoy:

I have received two additional statements in support of your claim for pension.

Mr. C. A. Bailey states that he has known you since you were above 16 years of age; that sometime after the Civil War he saw you on two occasions in a parade of Confederate Veterans wearing a Confederate Uniform. This is entirely insufficient to show six months of active military service.

Dr. Archie Avery states that he has seen you in uniform but he did not state when or where. In telling to me he figured that he was only 9 years old when the war closed; that he never saw you in the service and never saw you in uniform except in the Cotton Exposition over 20 years after the war. This statement is insufficient to prove 6 months of actual military service.

You have probably misunderstood some one to tell you that an affidavit stating that you wore a uniform would entitle you to a pension. That is not the case. The affidavit must state that they saw you in uniform on duty with your organization during the Civil War and in the performance of actual military duty. Since your name is not carried on any record, it will be necessary for you to submit affidavits of your actual presence with your Command 6 months before the close of the war and an affidavit of your presence when your Command was surrendered or demobilized.

Very truly yours,

Director

October 26, 1934.

Rev. Marshall McCoy,
AUGUSTA, Georgia.

Dear Mr. McCoy:

Reverend Benjamin F. McCoy, now a resident of Fulton County, has made application for a Confederate soldier's pension, but he cannot produce any witness by whom to make proof of his Confederate military service, and we are unable to locate any official record of such service.

I am advised that you are a brother of the Mr. McCoy who has applied for a pension, and I should be very glad indeed if you would send me, by return mail, such information as you may be able to give in reference to the military service claimed.

If you are about the same age as your brother, you are doubtless in position to contribute something in the way of supporting testimony, even if you were not yourself a Confederate soldier.

Please let me hear from you by return mail.

A stamped and addressed envelope is inclosed for your convenience in replying.

With kindest regards,

Yours very truly,

Chief Clerk.

A. L. HENSON,
DIRECTOR

C. ARTHUR CHEATHAM,
ASST. DIRECTOR

MISS LILLIAN HENDERSON,
ASST. DIRECTOR



THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

December 17th, 1934.

Rev. Benj. F. McCoy,
765 Marietta Place, N. W.,
ATLANTA, Georgia

Dear Mr. McCoy:

I have just finished a telephone conversation with you regarding your application for Confederate pension.

This record discloses that we made every possible effort to find proof of your service. There is no record of your service in Co. "A" 19th Georgia Regiment nor is there any other record of your service in either the Confederate Army or the organized reserves or militia.

We have addressed letters to every person whose name you gave us. In response to our letter of October 26th, 1934, which we addressed to your brother, Rev. M. A. McCoy, he states that he never heard of your Confederate service. It occurs to me that surely your brother would have known it if you had been in the service.

You gave us a list of people whom you said served with you. In the checking of their records it was found that they were in various organizations and none of them were in Co. "A" 19th Ga. Rgt.

The present record is wholly inadequate to prove your service and unless you are able to get the affidavits of comrades who served with you it will be impossible under present law to admit you to the rolls. As I stated to you, the evidence of an applicant is not sufficient as a basis for the allowance of a pension.

Yours very truly,

Director

C. ARTHUR CHEATHAM,
ASST. DIRECTOR

MISS LILLIAN HENDERSON,
ASST. DIRECTOR



THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

Ga., March 6, 1935.

Mrs. J. Jack Hill, Pres.,
Cartersville, Ga.,
My dear Mrs. Hill:

Several weeks ago I wrote you asking for a certified copy of the application filed by Rev. Benjamin F. McCoy when your Chapter presented his Cross of Honor, stating that this record was desired as evidence in his application for a pension.

I have not received a reply to this request, and Mr. McCoy insists that your Chapter presented this Cross of Honor. Will you do me the kindness to send me this record if your Chapter had such record?

My only interest in this matter is to be of service to Mr. McCoy, and I am sure you feel a similar interest in assisting any Confederate soldier in any way you can; therefore, an early response to this request will be appreciated.

If you have no record I will be glad if you will so inform me.

I have written Miss Rebecca Dupont, Recorder of Crosses of Honor, at Savannah, and she stated your Chapter would have this record.

Very truly yours,

Lillian Henderson
Assistant Director.

*Sent Special Delivery
770 reply ylt.
A.H.*



Executive Department
Atlanta

EUCLID T. TALMADGE
GOVERNOR

CARLTON MURLEY
SECRETARY EXECUTIVE DEPARTMENT

April 24, 1935.

Rev. B. F. McCoy,
765 Marietta Place, N.W.,
Atlanta, Georgia.

My dear Mr. McCoy:

With reference to your application for pension, I wish to advise that I have looked the matter over and feel that while you may be entitled to a pension, the proof submitted is not sufficient to meet the requirements of the law.

I am referring the file back to Mr. A. L. Henson, Director of the Veterans Service Office, with the request that he make a further investigation and see if it is possible to develop sufficient evidence to meet all requirements of law and enable your name to be placed on the pension roll.

With best wishes, I am

Sincerely yours,

Eugene Talmadge
Governor.

ET:CM:b

CC: Mr. Henson

Barrow

October 22, 1934

Judge R. M. Gaines
Ordinary, Barrow County
CARTERSVILLE, Georgia

Dear Judge:

Rev. Benjamin F. McCoy, now a resident of Fulton County, wishes to make application for pension, but he cannot produce any witness whom to procure proof of his Confederate military service, and we are not able to locate an official record of the same.

Mr. McCoy states that several years ago he was awarded a Cross of Honor, by the Chapter of The U.D. G. at Cartersville, Georgia. If we could obtain the copy of the application where he applied to the Chapter for the Cross of Honor, it might give us some preliminary information that would lead to the location of the official record of his service, which record should certainly be on file either here or in the Adjutant General's Office in Washington, D. C.

Please do Mr. McCoy the kindness to ascertain if the application for the Cross of Honor is still in existence, and, if so, make a copy of the same and send it to me. It will not be necessary for this copy to be certified.

It is important that this matter be given attention as soon as possible, as we might be able to enroll Mr. McCoy for the September, 1934 payment, if the application can be approved before the end of this month.

I feel sure that you will be glad to accommodate this worthy Confederate veteran in a matter which is of such importance to him.

Very truly yours,

ALH:A:LT

Director.

A. L. HENSON,
DIRECTOR

C. ANTHONY CHEATHAM,
ASST. DIRECTOR

MISS LILLIAN HENDERSON,
ASST. DIRECTOR



THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

March 13, 1935

IN RE: Application of Benjamin F. McCoy, Fulton County,
For Confederate pension:

This record contains conflicting evidence and it becomes necessary to weigh the evidence under the usual rules.

Applicant contends that he served about two years in Company A, 19th Regiment. There is no record of his service in this organization, either in the files of the Soldier Roster Division or in the files of the Adjutant General's Office at Washington. The burden of proof is, therefore, upon the applicant to show that he served at least six months in the Confederate Army or in the Organized Militia of the State of Georgia during the War between the States, and that he was honorably separated from that service.

This organization has made every possible effort to locate records and evidence to sustain applicant's claim.

Applicant submits the evidence of Mrs. Mary J. Jones, (by affidavit). Mrs. Jones states that while in training as a nurse near Cartersville, Georgia, she knew W. A. McCoy who was in service at Coopers Iron Works; that he was armed and in uniform performing the duties of a Confederate soldier in Company A of the 19th Regiment; that he was detailed to haul iron and while in the performance of this duty sustained an injury to his shoulder; that he went to the Field Hospital and remained there until the Surrender. A representative from this Office called upon Mrs. Jones, who stated that Benjamin J. McCoy was the soldier she had reference to in her affidavit; that she saw much of him, as her brother was in the same organization; that her brother was sick in the hospital and she remained with him for one month and that B. F. McCoy was in the same hospital.

Applicant states in the record (see application) that he went home on three months furlough when he was injured and remained there until the Surrender. Applicant gives numerous lists of men whom he claimed to have served with in this Organization, but the majority of these served elsewhere and were never in Company A of the 19th Regiment. Some served

-2-

in different divisions and in different parts of the country.

Applicant's elder brother, W. A. McCoy, stated that he never knew anything about any service of applicant in the Confederate Army.

See also letter from Judge Gaines, Ordinary, Bartow County, attached to the record.

Inasmuch as there is no record of any service on the part of applicant and in view of the conflicting statements of applicant himself, and in view of the fact that a member of the family of applicant knew of no Confederate service, I am constrained to the view expressed by Judge Gaines. I do not think the burden of proof has been carried.

On this finding of fact I am compelled to decline the application.

This the 13th day of March, 1935.

L. Henson
Director.

that Benjamin J. McCoy was the soldier she had reference to in her affidavit; that she saw much of him, as her brother was in the same organization; that her brother was sick in the hospital and she remained with him for one month and that B. P. McCoy was in the same hospital.

Applicant states in the record (see application) that he went home on three months furlough when he was injured and remained there until the surrender. Applicant gives numerous lists of men whom he claimed to have served with in this Organization, but the majority of these served elsewhere and were never in Company A of the 19th Regiment. Some served

A. L. HENSON,
DIRECTOR

C. ARTHUR CHEATHAM,
ASST. DIRECTOR

MISS LILLIAN HENDERSON,
ASST. DIRECTOR



THE VETERANS SERVICE OFFICE

STATE CAPITOL
ATLANTA

Benjamin Franklin McCoy
Enlisted about August, 1862
Discharged, disability, about November, 1864, by Doctor Baker
Enlisted at Big Shanty, Bartow (Cass) County, Georgia.
X *Captain Johnson*
Lieutenant Blawie
Colonel C. M. Jones or Colonel Barton
Was in battles at Allatoona, New Hope, Fredericksburg
Was at home near Cantonville, Bartow County, at surrender.
Co. A, 19th Ga. Volunteers.

Was in same Regiment with
George Freeman - County
Lee Burrell, Bartow County
A. Y. Sheets, Bartow County
for Georgia, Floyd County

A. L. HENSON,
DIRECTOR

C. ARTHUR CHEATHAM,
ASST. DIRECTOR

MISS LILLIAN HENDERSON,
ASST. DIRECTOR



THE VETERANS SERVICE OFFICE

STATE CAPITOL
ATLANTA

Co. A, 19th Regt. Ga. Infantry went into service from Fulton County, Ga., commanded by Frank M. Johnston. Francis M. Stovall was 2d Lieutenant.

Lee Burrell and A. Y. Sheets do not appear on this roll. One John H. B. George was a private in this company.

The name Benjamin Franklin McCoy does not appear on this roll.

Co. K, 19th Regt. Ga. Infantry went into service from Bartow County, but none of the above mentioned names appear thereon.

The colonel of the 19th Regiment Ga. Infantry was W. W. Boyd

Depositions of Mrs. Mary J. Jones taken before Laura Selman, Commissioner and Notary Public for the State of Georgia at Large, on the 3rd day of May, 1956, at Atlanta, Georgia.

Examination of the witness by A. L. Henson, Director of the Veterans Service Office.

Q. Do you know Ben F. McCoy?

A. Yes.

Q. How long since you have seen him?

A. Why four or five months ago, I think. Maybe a little longer than that. When I was sick his daughter came over here to see me and he came with her. We have been old friends for many years.

Q. You have known him all along since the war?

A. Not all along. He was quite young and I was quite young when I first met him. Then I married and went to Texas and I did not see him until after I came back. After I married and went to Texas I did not see him but occasionally I heard from him when I would write and tell them where I was at. As for seeing him, I did not see him after he was in the Army but when I met with him again he was married and had a family and I was married but I never had a family. We met up again about thirty or forty years ago. He was a man who had a business and kept his store down on, I forget what street, the one below Marietta.

Q. Was he a Minister of the Gospel?

A. Well, he was kind of a supply. I have heard him and he was a Baptist preacher. I have heard him at North Avenue.

Q. He was the same man that you saw in the Army up at Cooper's Iron Works?

A. Yes and we have talked it over about me meeting him up there when I first went up there. You know how it is about young people going into a neighborhood getting acquainted. He was alright when I went up there. They had a party and he was at the party.

Q. Where was that party?

A. It was just a neighborhood party close to the army.

Q. Was there many soldiers come around there at that time?

A. Yes, his Regiment was there.

Q. Do you remember what Regiment that was?

A. It was the 19th Georgia Regiment.

Page #2.

Q. Did you know the Commander of the Regiment?

A. No. I did not get acquainted with the whole Army. I just got acquainted with Mr. McCoy.

Q. Can you remember some other folks that you got acquainted with at the same time?

A. No, if I did, well a man by the name of Clark.

Q. Was he in the Regiment?

A. No, he was an old man and he and his wife were living there.

Q. I just wonder if you can remember the names of some other soldiers who were in the Regiment at the same time?

A. I did not get acquainted with many of the men. I think there was a Gillespie at the party. That is the only time I saw him. They were all in full uniform. They got up and danced and I never had danced any and he got me to dance with him and I said "Why I don't know how to dance" and we had lots of fun over my dancing.

Q. Was it Mr. McCoy who got you to dance with him?

A. Yes. We all danced but neither one of us did not know anything about dancing.

Q. Did you know Mr. McCoy's brother, W. A. McCoy?

A. No, I did not know him. He was quite a little boy and I have heard him talk about him since we met up here again about his younger brother. He was just a little boy.

Q. I believe you were up there taking care of the sick men?

A. Yes, I was training for a nurse and I had every access to the Army as a nurse.

Q. Your brother was in the Army?

A. Yes. My brother was under General Johnson. He fought around Atlanta.

Q. Was he at Cooper's Iron Works?

A. Yes, he was up there sick. That is the reason I was up there.

Q. Did you know a soldier who was in the Camp with your brother and Mr. McCoy named Lee Burroughs?

A. Yes. I was not personally acquainted with him but I know he was in the Regiment.

Q. Did you know a man in the Regiment named Sheets?

A. In the 19th Regiment?

Q. Yes.

A. Well, my acquaintances with such as that was so dim that it just passed out of my memory.

Page #3.

- Q. At the dance that night, that was before General Sherman came down here?
- A. Yes, that was before Atlanta was taken.
- Q. How was Mr. McCoy dressed?
- A. Full uniform. Dressed like all the others.
- Q. Like the other soldiers?
- A. Yes. He was a detail man and they was hauling to the Iron Works for the Army where they made cannon shots and shell and everything and he was hauling back and forth. He was alright until he got hurt.
- Q. You saw him after he got hurt?
- A. Yes, I called to see him in the Hospital after he got hurt. He went home for about a week and he came back and lived up there but he did not begin to work. The Doctors did not think his shoulder and arm were strong enough to go to work.
- Q. Did you ever see him drilling?
- A. Yes, whenever they drilled he was in too and the crew who was with him had to go drill.
- Q. Did you see him with a musket?
- A. Yes, they had their guns with them. Some Yankees came up and they got into a skirmish with them. The report was that they killed two Yankees in that skirmish.
- Q. You saw Mr. McCoy with his uniform on with his musket and drilling with the other men?
- A. Yes. They all had to go in and drill. They had a certain time to drill and had to go over every week and drill.
- Q. Do you remember what happened to that Camp when Sherman came through?
- A. I was not up there then. I had to leave and when Sherman came into Atlanta my brother's command went to Griffin.
- Q. Did Mr. McCoy go with them?
- A. No, my brother was in the Volunteers, 4th Georgia, as well as I remember. They called them the Volunteers because they formed down in Macon.
- Q. How you did not see Mr. McCoy after you left Cooper's Iron Works any more until after the war was over?
- A. I did not see him anymore until after I went to Texas and came back home. All that was about forty years ago. I owned property right in the front of them and lived there four years.
- Q. Where was Mr. McCoy the last time you saw him in the Iron Works? Was he in the Hospital?

Page #4.

- A. No, he was up and about with his arm in a sling but he did not begin to work yet and I said when he came back from home, he went home to rest a week, and I said "You are not going to work yet, are you" and he said "No, the Doctor did not think his arm and shoulder strong enough". I never saw him anymore after I left up there before Sherman came and I did not see Mr. McCoy any more after Sherman came in. His Regiment was left up there I think. I do not think his Regiment came down here because if he had, his Regiment would have been here and I would have seen him. After Sherman came in the Army went as far as Griffin and my brother was taken sick in Griffin with pneumonia and died that Fall. I had three brothers in the War but my other two brothers were with Lee's Volunteers and went with Lee.
- Q. I think that is enough information and I certainly appreciate your being kind enough to talk to us about it.
- A. When they first came here to see me about it I was perfectly willing to tell what I know and after I got acquainted with him I had an old veteran brother with me that was with Lee. He did not have any family. His wife died and left him and I taken him to board with me and he lived four years after that time with me and my brother. My brother he had a pension and him and Mr. McCoy talked many times about a pension, what a hard time he had getting a pension.
- Q. Did you ever hear Mr. McCoy say why he did not get a pension?
- A. Yes, he told my brother "as long as I can live on my own resources, I do not want a pension". He was then keeping a store. My brother did not get a pension until about five years before he died.

GEORGIA)
:
Fulton County)

I certify that the witness, Mrs. Mary J. Jones, came before me this day and after having administered an oath, gave answer to all the questions propounded as set out hereinabove; that I took both questions and answers in shorthand and transcribed same and that these depositions truly represent the questions asked and the answers.

Witness my hand and seal this 3rd day of May, 1935.

Laura J. Selman
Notary Public, State-at-Large, Georgia.

of them and lived there four years.

Q. Where was Mr. McCoy the last time you saw him in the Iron Works? Was he in the Hospital?

Witness my hand and seal this 3rd day of May, 1935.

Laura J. Selman
Notary Public, State-at-Large, Georgia.

Atlanta Ga ①
March 29-1935

Governor Eugene Salmadge;

Dear Governor,
I have applied for my pension through the veterans office they have even fit to turn my application down. I have never asked for my pension before as I have always lived on my own resources, thinking some one else was more needier than I.

To you I am appealing as I feel you will give me justice in the matter.

Governor I have evidence of Mrs. Mary J. Jones of 744 Pulliam St. Atlanta Ga. whom has known me most all my life. She saw me in service and full uniform performing the duties of a Confederate Soldier in Company A 19th Ga. Regiment.

I was detailed to haul iron and while performing this line of duty

②
I sustained injuries to my shoulder and hip. I then went to the hospital and from there home, receiving an Honorable Discharge.

Mr. Hanson has an affidavit signed by Mr. Bailey of Ponder's Ave, Atlanta Ga. who saw me in full uniform after the war. Also an affidavit from Dr. Avery to the same effect.

My youngest brother M. A. McCoy of Acworth, Ga has written Mr. Hanson saying he knew nothing about my war record. He was a mere baby during the war. His wife states she knew nothing of the letter and said he had not been at himself for over a year before his death.

Mr. Hanson stated he has a letter from Judge Gains of Bartow County.

I do not know what he knows about my war record as he is a

duties of a Confederate Soldier in
Company A 19th Ga. Regiment.

I was detailed to haul iron and
while performing this line of duty

from Judge Stains of Bartow County.
I do not know what he knows
about my war record as he is a

younger man than I.

I am 87 years of age.

I am sending you the record just as
Mr. Huson sent it to me.

Hoping that you can help me
Governor, as I am very much in need
of my pension.

Thanking you in advance for any
service you may render me.

I am a Salmdage man first, last,
and always.

Yours very truly,

B. J. McCoy.

763 Marietta Place n.w.

Atlanta Ga.

A. L. HENDERSON,
DIRECTOR

C. ARTHUR CHEATHAM,
ASST. DIRECTOR

MISS LILLIAN HENDERSON,
ASST. DIRECTOR



THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA, Ga., Sept. 27, 1934.

Data given by Mr. Benjamin Franklin McCoy relative to his service
during the War between the States:

Colonel of regiment: --Straight; Rich, C. M. Jones.

Regimental Surgeon, Thos. H. Baker.

Comrades: Burroughs, Leg,
Horton, W. H.,
Hedgeman, George,
George, Joe,
Hartman, J. J.,
Hartfield, --
McCoy, Andrew Jackson,
McCoy, Jesse Washington,
Rice, Robert.

Durwell, Leg, 19th Regt. Ga. Inf.
Shaw, 19th Regt. Ga. Inf.

Permanently injured in accident, wagon overturned, Mack K. Cogger's
Iron Works.

Home, wounded furlough, close of war.

"Disch. Regt."

OFFICE OF
COURT OF ORDINARY
BARTOW COUNTY
R. M. GAINES, Ordinary

Cartersville, Ga., Oct. 25, 1934

Hon. A. L. Henson
Veterans' Service Officer
State Capitol,
Atlanta, Georgia.

DEAR MR. HENSON:

FILED
OCT 26 1934
VETERAN SERVICE OFFICE

In reply to your letter of October 18, 1934, I referred to Rev. Benjamin F. McCoy, now a resident of Fulton County, who was formerly a resident of Bartow County. I talked with a nephew of Rev. McCoy, who is a very reliable man. He states to me that he is absolutely sure that Mr. McCoy is mistaken about having ever been a soldier in the Civil War. He says that his grandfather, who was the father of this man, and an older brother were in the army, but he has never heard of this man having been in the army, and also states that there was a brother who was older than this man, who was not old enough to go in the war.

This man states he feels sure his uncle is old and weak in both body and mind and just hasn't heard so much talk of the war during his younger days, has formed an idea that he was in the army.

OFFICE OF
COURT OF ORDINARY
BARTOW COUNTY
R. M. GAINES, Ordinary

Cartersville, Ga., 1934

Should you desire more information on this, and will write to Rev. Marshall McCoy, Acworth, Ga. who is a brother to this man, and a rather popular Baptist Minister thru this section of the country, I am sure you can get the information desired direct from him.

Yours very truly,

R. M. Gaines
Ordinary Bartow County, Ga.

A. L. HENSON,
DIRECTOR

C. ARTHUR CHEATHAM,
ASST. DIRECTOR

MISS LILLIAN HENDERSON,
ASST. DIRECTOR



THE VETERANS SERVICE OFFICE

STATE CAPITOL
ATLANTA

IN RE: Application of Benj. F. McCoy, Fulton County,
Confederate pensioner.

This application was reconsidered this date upon the evidence of Mrs. Mary J. Jones, in the form of depositions before a commissioner. I find that this evidence is sufficient to establish the service of the applicant in the 19th Georgia Regiment, C.S.A. Especially this is true when corroborated by other testimony in the record, particularly that of Doctor Arch Avery, himself a Confederate pensioner.

Therefore, ordered that the Order entered in this case on March 13, 1935 be rescinded.

Further ordered that Benj. F. McCoy be enrolled as a Confederate pensioner effective April 1, 1935; that supplemental pay roll be prepared by the Ordinary of Fulton County for that month and that said pensioner be included in future pay rolls.

This May 4th, 1935.

A. L. Henson
Director

Should you desire more information on this, and will write to Rev. Marshall McCoy, Acworth, Ga. who is a brother to this man, and a rather popular Baptist Minister thru this section of the country, I am sure you can get the information desired direct from him.

Yours very truly,

P. M. Gains
Ordinary Barton County, Ga.

A. H. Henson
Director

Acworth Ga.
Oct 29, 1934.

W. Sam Astor Chief Clerk
Veterans Service Office,
State Capitol,
Atlanta, Ga.

Dear Sir,

In regard to my brother
Benjamin F. McCoy's service
in the Confederate military
service.

I know nothing at all
about it.

Yours very truly,

M. A. McCoy

15
Dec 2
four days
ago

Atlanta Ga

Nov 15 1933

To Mr A. S. Henson,
I do know Mr B. F. McCoy
was in the War in
the 60th some seen him
in his uniform
known as 19th Reg. Company
A 50th order array
James L. Henson

C. E. R.

enlisted at Ky. State
 August 5 1862
 Co A 19th Ga Regt
 Col Neal, Regt
 Capt Johnson
 Lt Stovall
 Benjamin Franklin
 McCoy

Lee Bourah
 A. J. H. H. H.
 Geo. George

Allen Harrison
 Mrs. H. H. H.
 Ga Regt

There are no
 rolls on file of
 Co. A, 19th Regt.
 1st Infantry.
 No record has been
 found of the
 service, capture
 or parole of Benjamin
 Franklin McCoy
 as of Co. A, 19th Regt.
 1st Infantry.
 (M.R.)

Mr. Asher.

Colonels - 23rd Regt. Ga
 Infantry man

Hutchinson, Thomas.
 Barclay W. P.
 Bent, Henry J.
 Higgins, J. H.
 Ballenger, M. R.

Col. Williford not
 identified.

Co. A, 23rd Regt. Ga.
 Infantry not in
 service from Barton
 County, but the name
 McCoy or McKoy is
 not there thereon.

not on any Infantry
 company from Barton

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority
now comes R. A. Bailey, who upon oath says:

That he is 76 years of age and has known
B. F. McCoy since affiant was about 16 years of age; that
sometime after the Civil War, affiant saw the said B. F.
McCoy on two occasions (once at Kennesaw and once at Acworth)
in a parade of Confederate Veterans and the said B. F. McCoy
on both occasions was wearing a Confederate Uniform.

Sworn to and subscribed before me
this December 17, 1934.

R. A. Bailey
Notary Public, Fulton County, Ga.

R. A. Bailey

STATE OF GEORGIA
FULTON COUNTY

Personally appeared B. F. McCoy, who being duly sworn deposes and
says that all of the comrades of Company A. 19th Regiment Infantry
which were with him during the War are now dead, he having enlisted
in the Confederate States' Army August, 1862.

He was present when Mr. Dupree was wounded, also when Tom Dobbs lost
his arm. Among the members of his Company was his father Andrew J.
McCoy, J. M. McCoy, Voe George of Rome, Ga. Lee Saffell of Kingston
Ga. A. Y. Sheets of Kingston, Ga. and others including Dr. Thos. H.
Baker, the Army Physician who attended me when I was wounded.

There is now in the Soldiers Home, who could give additional infor-
mation with reference to my service, the following: Dr. Arch Avery,
and Comrades Morris and Judd, but on account of their mental condi-
tion are unable to furnish affidavits.

Sworn to and subscribed before me
this 20th. day of October, 1934.

Charles H. Mason
C.C. ORDINARY

B. F. McCoy

Colonel Neal was in charge of the
9th Georgia Regiment in Colquitt
Regade in the Army of Northern
Virginia. Colquitt had been shipped
in Virginia shipped to J. L. Lee, and
from there shipped to the Cavalier.

Sworn to and subscribed before me
this 20th. day of October, 1934.

Charles H. Mason
C.C. ORDINARY

and Comrades Morris and Judd, but on account of their mental condition are unable to furnish affidavits.

B. H. McLaughlin

Savannah, Ga. Feb/2-35

My dear Miss Lillian:-

I am of the 8th relative to Cross of Honor
given Rev. Rufus F. McCoy:-

I have to refer you to the Cartersville
Chapter which should have on file
the application made out by Mr. McCoy.
I only have alphabetical lists - the Chap-
ters owning the applications. The Carters-
ville Ch. had very fine records. I think
tho they had a fine long years ago
but a cross record during recent years
should have application in its hands.
I'd write that Chapter but am sick
again - and away from home where
I can't write with name of Chapter
presidents, etc. is there, and to save
time this end I thought I'd better write
you & let you return office with the

Cartersville Ga.
March 7-1935

Miss Lillian Henderson

My dear Miss Henderson

I am sorry indeed
that you had to seek me a record
request for the Mr. McCoy, you
are certainly very kind indeed;
our Register is in Atlanta
with her husband who is very
ill at a hospital, & she has been
down there for over three weeks, &
I could not get to our papers etc
until to-day, but we could not
find any record at all of any
one by the name of McCoy. We
searched carefully. I have only
been Pres. of our Chapt. for little
over two years, but no one has
ever had a Cross of Honor since I
have been in office, now of course
it is possible that his papers
have been misplaced.
We had one member of our Chapt.

I'm meeting out at White Bluff 14 miles
on the Salt River home. I am also
sorry to advise there are no Crosses of
Honor records from 1907-1917. My friend
1900 to 1907- so if the Cross was given
then, or during that period the Chapter
alone have any record - I have the book
Chapter applications - but can't reach for
prior to 1907-8. for Georgia - & they are
arranged according to Chapters alphabetically
and not alphabetically as to individuals
as for Mrs. Gabbett's record. So lady I need
your assistance & the Chapter!!

Die been sick again since Inna's White
birthday - really ill. doctor and trances
mucus blood pressure & poisoning (white
travel) then on Feb 1. had teeth to Ray's
& two large molars & one wisdom tooth
extracted. It comes out one molar much
easier to the way out as soon as I am
able & its less sore. I took gas this & it
wasn't so awful. But the "digging out" of
roots by using Novocaine didn't appeal to
me

have been misplaced.
- He had one member of our chapter

that kept up with every one of the
Confederate Soldiers etc, but since
he passed away a year ago, I
am sorry to say that our work
has gone down.

I would love so much to help
and old Soldier, & we found a
great many papers of Confederate
Soldiers that had rec'd Crosses
of Honor but as I first said we
could not find any one by the
name of Mr. Coy, if he could
suggest any thing else I could
do I would be glad to try.

Very sincerely,
Frances Lewis Hill
(Mrs. J. Jack Hill)



Executive Department

Atlanta

EUGENE TALMADGE
GOVERNOR

Mar. 30, 1925.

CARLTON MOBLEY
SECRETARY EXECUTIVE DEPARTMENT

Rev. B. F. McCoy,
788 Marietta Place, NW,
Atlanta, Ga.

Dear Bro. McCoy:

I am in receipt of your letter
of March 29th with reference to your application
for a pension.

I am asking Mr. Henson to send me
the record in your case so that I may go over it with
a view of determining whether or not it is possible
to place your name on the pension roll.

As you know, there are certain re-
quirements of law that would have to be met before
we can pay you a pension.

With all good wishes, I am

Sincerely,

Eugene Talmadge
Governor

ET:CM:er.

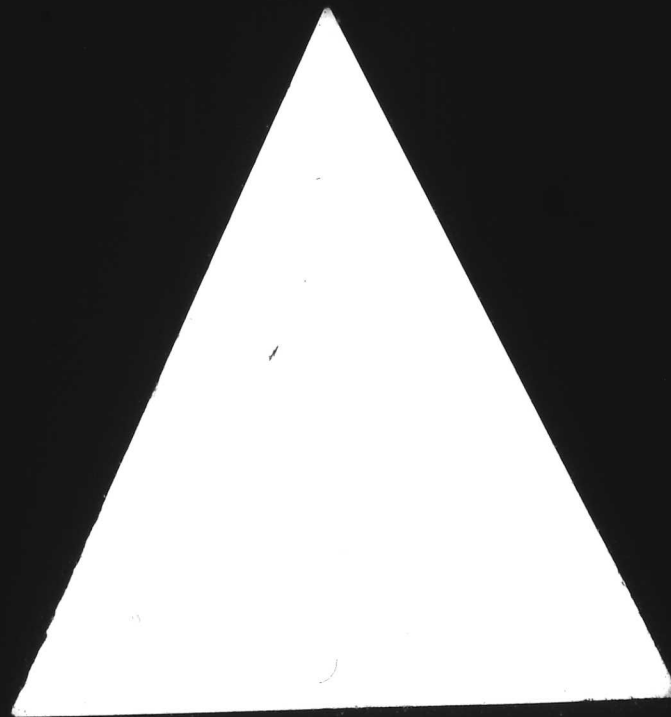
CC: Hon. A. L. Henson,
Veterans Service Office.

Sincerely,

Ernest T. Salenberger
Governor

ET:CM:er.

CC: Hon. A. L. Hanson,
Veterans Service Office. ✓



Approved ^{McCoy, D. W.}
Richard Johnson
Secy
No. 753
Mc Coy, D. E.
Fulton Co.

INDIGENT PENSION

1895.

Name *Duncan Edmund*

County *Fulton*

Ground

July 11 1896
RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

appct.

Dep. W. Harrison, State Printer, Atlanta.

24 Sept 22 July 1895
Further proof as to in-
firmity is required
Rich a Johnson
Secy

24 Sept 17 Oct 1895
Applicant states that
he can earn \$50.00 per
year - see No 14-22.
It must be shown by two
physicians that applicant
is unable to labor at any
work or calling sufficient
to earn a support for him-
self - This was not
appear
Rich a Johnson
Secy

to receive and receipt for the pension allowed and request that the result same to

STATE OF GEORGIA.

County, }

POWER OF ATTORNEY.

I,

Witness my hand and seal this

Executed in presence of

day of

by

1895.

of

herby authorize

POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

I, _____, of _____ County, _____ State of Georgia, do hereby authorize _____ of _____ County, _____ State of Georgia, to receive and receipt for the pension allowed and request that he remit same to _____ at _____ day of _____ 1895.

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

Executed in presence of _____

*By Sept 22 July 1895
Faintly proof as to in
family is required
Rich a Johnson
Sec
By Sept 17 Oct 1895
Applicant state that
he am aged 50-55 yrs
Now - age 70 14-22.
It must be known by two
physicians that applicant
is unable to labor at any
work or carrying sufficient
to earn a support for him
and - They are not
after him*

*Approved Mc Coy D.E.
Richard Johnson
Mc Coy D.E.
Duncan*

INDIGENT PENSION
1895.

Name *Duncan Evans Mc Coy*
County *Doolen*
Grade *1895*

May 11 1896
RICHARD JOHNSON,
Secretary Executive Department

WARRANT MADE TO
Appt.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Doolen County.
Duncan Evans Mc Coy of said State and County, desiring to avail himself of the Pension Act approved December 16th, 1894, hereby submits 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 post office) *Duncan Evans Mc Coy, County of Doolen, State of Georgia, P.O. Blue, Carroll County, Georgia, sixty three years residence in Ga.*
2. Where did you reside on January 1st, 1864, and how long have you been a resident of this State? *Carroll County, Georgia, sixty three years residence in Ga.*
3. When and where were you born? *Way, Georgia, in 1832 on 1st child in family county Georgia.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Yes the Confederate Army.*
5. When and where did you enlist? *In Dec 1862 in Carroll County, Georgia.*
6. In what company and regiment did you enlist? *Company F, 1st Georgia Cavalry.*
7. How long did you remain in that company and regiment? *Until surrendered.*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
9. For how long a period did you discharge regular military duty? *From 1862 until we were surrendered in 1864.*
10. When, where and under what circumstances were you discharged from service? *When we surrendered as above stated.*
11. What is your present occupation? *Have none at present.*
12. How much can you earn per annum by your own exertions or labor? *Could not.*
13. What has been your occupation since 1865? *None.*
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *Need about \$500 per year, but have no property or income.*
15. What is your present physical condition and how long have you been in such condition? *I have had a broken leg for four years, and left leg paralyzed, and am crippled and bed-ridden.*
16. 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"? *All and poverty.*
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *I have been left penniless since Feb 1865, the only property of my wife being a small plot of land, and a small amount of property.*
18. What property, effects or income do you possess?
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *None in my own name.*
20. In what County did you reside during those years and what property did you then return for taxation? *In Carroll County, Ga. and returned to my wife's farm, and received no pay.*
21. How were you supported during the years 1893 and 1894? *From income from my wife's farm, and received no pay.*
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *My support cost about \$500 per year, and I received no pay.*
23. What was your employment during 1893 and 1894? What pay did you receive in each year? *I did not work on farm of my wife, I received no pay.*
24. Are you married and have you a family? If so, is your wife living and how many children have you? (Give age and sex of children and their means of support.) *I am married, have one minor child, have seven children all of age, three boys, and four girls, none of whom are able to aid me and my wife.*

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."

S. J. Brown
Ordinary 6.

Georgia - Carroll County - 1832. I am, Ordinary of Saint County certify that I have furnished 7, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840,

the 12th day of April 1895. J. W. Sullivan
S. J. Brown
Ordinary Council Co.
Witness

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

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

)

)

9

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

)

McCoy D. C.
No. 68
(For Those Already Enrolled.)

INDIGENT

Soldier's Pension.

1897.

Name McCoy D. C.
County Fulton

July 11 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

Apples

McCoy D. C.

McCoy D. C.
Harrison Co.

(For Those Already Enrolled.)

NO. 400

INDIGENT

SOLDIER'S PENSION,

1898.

Name D. C. McCoy
County Fulton

WARRANT ISSUED

4/12 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

Apples

McCoy D. C.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *D.E. McCoy* 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 *18th* day of *January* 1834; that he is *65* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *three years* in Company *D*, of *1st* Regiment of *Phillips' Legion*; that his physical condition is as follows: *Left leg paralyzed & ruptured*

that his property consists of the following items

Nothing

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

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

Sworn to and subscribed before me, this, *11th* day of *January* 1897.

D.E. McCoy Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this *11th* day of *January* 1897.



W.H. Hulse Ordinary *Fulton* County.

NOTE - The blank space must be filled

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *D.E. McCoy* 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 *18th* day of *January* 1834; that he is *65* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3 years* in Company *D*, of *1st* Regiment of *Phillips' Legion*; that his physical condition is as follows: *Left leg paralyzed & ruptured*

that his property consists of the following items

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

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

Sworn to and subscribed before me, this, *12th* day of *January* 1898.

D.E. McCoy Ordinary.

State of Georgia,

Fulton County.

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

Given under my official signature and seal, this *12th* day of *January* 1898.



W.H. Hulse Ordinary *Fulton* County.

NOTE - The blank space must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____, hereby authorize

of _____

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

at _____

by _____

Witness my hand and seal this _____ day of _____ 1899.

Executed in presence of _____

(L. S.)

Wm. H. C.
Fulton County

COOK REC. 1894.
(For These Already Enrolled.)

No. 222
Is Pending to 1900

INDIGENT

SOLDIER'S PENSION,
1899.

Name *P. E. McCay*
County *FULTON*

WARRANT ISSUED
1/18 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W. H. C.

Geo. W. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County.

Personally appears D. E. Mc Coy 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 1 day of 18 34, 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 3 years in Company F, of 1th Regiment of Phillips Legion; that his physical condition is as follows:

Paralyzed left leg. 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 1899. I have heretofore as a resident of FULTON county been allowed a pension for the year 189 8.

Sworn to and subscribed before me, this, the 18 day of July, 1899. D. E. Mc Coy Ordinary.

State of Georgia,
FULTON County.

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

Given under my official signature and seal, this 18 day of July, 1899.



W. H. Hulsey
Ordinary FULTON County.

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

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

Given under my official signature and seal, this 18
day of July 1899.



W. H. Hulsey
Ordinary. FULTON County.

Note.—The blank space must be filled.
Note.—A Affidavit should not be attached before January 1st, 1900.

Georgia } Before me
Fulton County } in person
appeared
Duncan Evans McCoy who
on oath says that when he
made his application for
Pension under acts of 1882
that he stated that he
thought that he might
possibly earn fifty dollars
per year. He now states
that he is unable to earn
Twenty Dollars a year and
that he has made every ef-
fort to make what he could
this year and that he has not
been able to earn Twenty
Dollars. He has no heart to

Atlanta, Ga., 189
Georgia } Before me
Fulton County } in person
appeared
J. J. Roper, M.D., who on oath says that
they are practicing Physicians
and as such that they have carefully
examined Duncan Evans McCoy
the applicant for Pension under
acts of 1882 and that we find
said applicant totally disabled
from performing any labor
of any kind whatever. The
physical powers of applicant
has given down totally and he
is not able to make a support
for himself. Applicant is old
and infirm and very much debili-
tated, and find his name

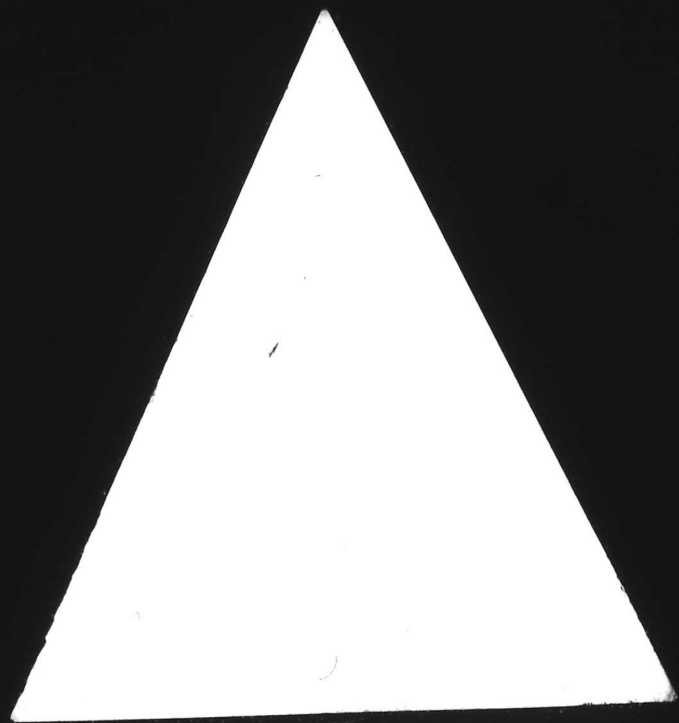
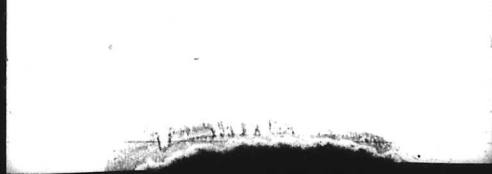
and is physically unable to
do any work at all, and has
not even voice to work
for several months, and that
he is penniless and unable
to get money to pay for even
what little food and medical
attention he really needs and
should have.
I am not authorized
to give you this release
30th/1895. Ducon & Co.
Milwaukee
(Ordinary)

very much affected, which
causes a total wreck of his
whole system which prevents
applicant from performing
any manual labor whatever.
I have subscribed before me
this Oct 30th 1895 - & certify that
the statement is true. E. N. Humphreys (Jr)
Notary Public
W. L. Acknowledged J. J. C. (Jr)
Ordinary

Georgia
In the County of [] in the State of Georgia
I, the undersigned, do hereby certify that
James V. [] appeared
before me on the 30th day of October 1895
and that he is now
the applicant. []
[] and that his
condition is very poor, he has a broken
leg, and his teeth are decayed in
his mouth, which prevents him
from getting about, but very little.
He is unable to work and is unable to
from income received in the past
to support himself or his family
from the low state of the
land etc. and he is very weak
and infirm, and has no other
by which he can derive a

his income, which prevents him
from getting about our cities.
He is unable to seek proximity
from money received in the past
to support himself or his family
from the low state of value the
bad old ex. and he is very weak
and indigent, and has no possibility
by which he can derive a

1000 ft. above
 above the level of
 above the level of
 40 ft. above the level of
 1000 ft. above the level of



McQuinn & Co.
Fulton County

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

NO. *581*

**INDIGENT
SOLDIER'S PENSION,
1900.**

Name *E. J. McQuinn*
County *Fulton*

WARRANT ISSUED

May 17 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

POWER OF ATTORNEY.
STATE OF GEORGIA,
County, }

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

by _____ day of _____ 1900.

Executed in presence of

[L. S.]

W. H. H.
W. H. H.

cannot locate application prior to this.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears E. J. McLeary 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 any day of 18 that he is 57 years old and by occupation a carver; 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 B, of 9th Regiment of Infantry; that his physical condition is as follows:

no property

that his property consists of the following items

no property

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Fulton county been allowed a pension for the year 1891 -

Sworn to and subscribed before me, this, the 17 day of Aug, 1900.

Ordinary.

State of Georgia,

Fulton County.

I, W. M. McLeary Ordinary of said County, do certify that I am well acquainted with E. J. McLeary the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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, 1900.



Ordinary Fulton County.

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

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

McClary & Co.
General Agents

OUR BROKER, LIA.
 (For Those Already Enrolled.)

No. *392*

**INDIGENT
 SOLDIER'S PENSION.
 1901.**

Name *McClary*
 County *Gulton*

WARRANT ISSUED
Jan 16 1901.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO
W. J. [Signature]

Wm. W. [Signature] State Printer, Atlanta.

Wm. J. [Signature]

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

County.

Personally appears E. J. McCrary 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 all his life day of 18; that he is 58 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company B, of 9 th Regiment of the 1st div; that his physical condition is as follows: Disabled

that his property consists of the following items.

No property
of the value of 0 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 1 900

Sworn to and subscribed before me, this the 5th day of May, 1901.

E. J. McCrary
Mane

John R. Wilkinson Ordinary.

STATE OF GEORGIA,

County.

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

Given under my official signature and seal, this 5th

day of May, 1901.

John R. Wilkinson
Ordinary Fulton County.



NOTE—The blank spaces must be filled.

NOTE—Affidavit should not be attested before January 1st, 1901.

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 _____

McCarty E. J.
of Fulton Co.

GOOD SECTION 12A.
(FOR THOSE ALREADY ENROLLED.)

No. 143

INDIGENT

SOLDIER'S PENSION
1902.

Name *E. J. McCarty*
County *Fulton*

Co. *B* Regiment *9th*
Baker

WARRANT ISSUED

1/14 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H. H.

JOHN W. LINDSEY, State Printer, Atlanta.

in data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County,

Personally appears

of

Fulton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State and has resided in said State continuously ever since the *18th* day of *Sept* 18*91*; that he is *57* years old and by occupation a *Farmer* that he enlisted in the military service of the Confederate States (or of the State of *Ga*) during the war between the States, and served for the term of *4 yrs* in Company *13* of *9*th Regiment of *Ga Vol Inf*; that his physical condition is as follows: *Fractured*

that his property consists of the following items *None*

of the value of *None* 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 *901*

Sworn to and subscribed before me, this the

day of *10* 1902

Ordinary.

STATE OF GEORGIA,

Fulton County.

I, *John R. Wilkinson*

Ordinary of said County,

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

Given under my official signature and seal, this *10* day of *10* 1902.



Ordinary.

John R. Wilkinson 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.]

McCrary, E. J.
Hulton Co.
(FOR THOSE ALREADY ENROLLED.)

No. 100

INDIGENT

SOLDIER'S PENSION
1903.

Name E. J. McCrary

County B

Co. B Regiment 9th

Yule At

WARRANT ISSUED

1/24 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

OK

Geo. W. Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension 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.]

McCrary, E. J.
Hulton Co.
(FOR THOSE ALREADY ENROLLED.)

No. 104

INDIGENT

SOLDIER'S PENSION
1904.

Name E. J. McCrary

County Fulton

Co. B Regiment 9th

Yule At

WARRANT ISSUED

1/23 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

OK

Geo. W. Harrison, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton.

County.

Personally appears E. J. McCrory 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 Birth 18__; that he is 60 years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 4 yrs in Company B, of 9th Regiment of 1st Va. Inf.; 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 ____, county been allowed a pension for the year 1__.

Sworn to and subscribed before me, this the

17 day of Jan, 1904, 1903.

Ordinary.

STATE OF GEORGIA,

County.

I, John B. Wilkinson,

Ordinary of said County,

do certify that I am well acquainted with E. J. McCrory the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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, 1904.

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 E. J. McCrory 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 Birth 18__; that he is 60 years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 4 yrs in Company B, of 9th Regiment of 1st Va. Inf.; 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 Fulton County been allowed a pension for the year 1__.

Sworn to and subscribed before me, this the

20 day of JAN, 1904, 1904.

Ordinary.

STATE OF GEORGIA,

Fulton. County.

I, John B. Wilkinson,

Ordinary of said County,

do certify that I am well acquainted with E. J. McCrory the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1904, 1904.

Ordinary

Fulton

County.



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

be and that he resides in this County.



Given under my official signature and seal, this _____ day of JAN 20 1903

Ordinary _____ County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1903.

J. M. WILKINSON

Given under my official signature and seal, this _____ day of _____ 1904



Ordinary _____ Fulton _____ County.

Note.—The blank spaces must be filled.

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

NAME McGraw, E. J. YEAR 1900 COUNTY Fulton

WHEN AND WHERE BORN? Resided in Georgia continuously all life.

ENLISTED WHEN AND WHERE?

RANK

COMPANY AND REGIMENT? Co E 9th Sctm, Co Infantry Vols

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES.

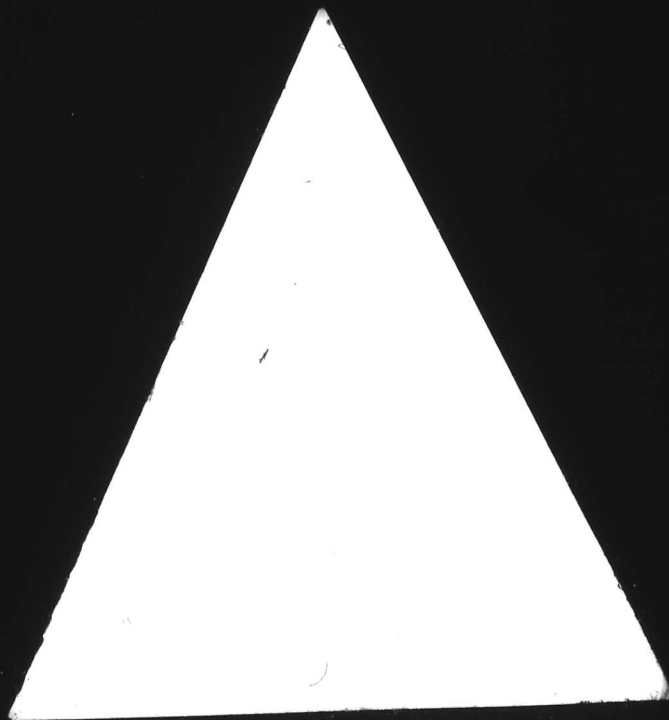
WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. ~~None~~



McCrary, J. C.
#348
McCrary, J. C.
Fulton Co
No. 1402

APPLICATION FOR

Artificial Leg

FOR CONFEDERATE SOLDIER

Applicant.....*J. H. McCrary*.....

County.....*Fulton*.....

Limb.....*Left Arm*.....

Amount.....*\$75.00*.....

Date of Warrant.....*Mar 8 1867*.....

Page.....

A. de la Cruz, R. L. L.
Capt. James A. McFarland
Co. 1st Regt. Ark.
Genl.

E. 1952

STATE OF GEORGIA.

Hullon County.

Personally appeared before me J. C. McCreary of the county of Hullon, State of Georgia, who, being duly sworn, deposes and says that he was on the 20th day of September, 1879, a bona fide resident of this State, that he enlisted in the military service of the Confederate States, or of this State, as a private in Company "W" Hedges Battalion Regiment of Volunteers that while engaged in such military service, to-wit: at the battle or engagement of the battle of the in the State of Georgia on the 19th day of September, 1864, he was wounded in the right leg, and that the same was amputated on the next day and that he has not received the payment allowed him for such limb under an Act entitled an Act to carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877, approved September 20th, 1879; that he has not supplied himself with an artificial leg; or that, not having done so, he prefers to supply himself with an artificial leg.

Sworn to and subscribed before me this 7th day of Nov, 1879 at Waters Geo.
J. C. McCreary
 Notary Public.
 NOTE.—The above affidavit must be made before some officer authorized to administer oaths, a Judge of the Superior or County Court, Justice of the Peace, Clerk of the Superior Court, or Ordinary.

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA,

Hullon County.

Personally came before me William A. Fuller of the county of Hullon, State of Georgia, who, being duly sworn, deposes and says that he was Captain in Company "A" Hedges Battalion and that J. C. McCreary the above deponent, was a private in said Company, and that this deponent knows that said J. C. McCreary lost a leg in the military service as said in the above affidavit.

Sworn to and subscribed before me this 5th day of Nov, 1879 at Waters Geo.
W. A. Fuller
 Notary Public.

NOTE.—If the affidavit of the commissioned officer is not obtainable, the following affidavit of three responsible citizens, must be furnished.

APPLICATION FOR

Artificial Leg

For CONFEDERATE SOLDIER.

Applicant J. C. McCreary

County Hullon

Limb Right leg

Amount \$95.00

Date of Witnessing Nov 15/79

Page 1

AN ACT

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

SECTION 1. Be it enacted by the General Assembly of the State of Georgia, That any person now a bona fide resident of this State, who enlisted in the military service of the Confederate States, or of this State, who, while engaged in said military service, lost a limb or limbs, may furnish to the Governor of this State proof that such applicant has supplied himself with such useful artificial limb or limbs, and the Governor, on reception of such proof, is hereby authorized to draw his warrant on the Treasurer of this State in favor of such applicant for either amount hereinafter mentioned, to wit: For a leg extending above the knee, one hundred dollars, for a leg not extending above the knee, seventy-five dollars; for an arm extending above the elbow, sixty dollars; for an arm not extending above the elbow, forty dollars. Provided the said amounts of money may be allowed to any one entitled to the benefits of this Act who may prefer to supply himself with the said artificial limb.

SEC. 2. Be it further enacted by the said authority, That such application shall contain proof of such applicants being entitled to the benefits of this act and shall further state whether arm or leg has been supplied. If an arm, whether extending above the elbow or not; if a leg, whether extending above the knee or not, and the Governor shall decide the sufficiency of the proof submitted.

SEC. 3. Be it further enacted by the said authority, That no applicant shall receive the sum allowed under this act oftener than once in five years.

SEC. 4. Be it further enacted by the authority aforesaid, That all laws and parts of laws in conflict with this Act be and the same are hereby repealed.

HENRY R. GORTCHUS,
Secretary House Representatives
Wm. A. HARRIS,
Secretary Senate
Approved, September 9th, 1879

A. O. BACON,
Speaker House Representatives
RUFUS E. LAMER,
President Senate
ALFRED H. COLQUHITT, Governor

STATE OF GEORGIA,

County.

Personally came.....

..... who, being duly sworn, depose and say they are acquainted with.....
..... and know that he lost a..... in the military service during the late war;
that said..... was amputated.....; that he is a bona fide
citizen of this State, and we are well satisfied that the facts stated by him in the above affidavit are true.
Sworn to and subscribed before me this..... }
..... day of..... 18..... }

STATE OF GEORGIA,

County,

I, *Charles Pittman*, Ordinary of.....
county, do certify that I am well acquainted with.....
the applicant for a....., and am well satisfied that the facts stated by him in the foregoing
affidavit are true, and that I am well acquainted with.....
the citizens who make this affidavit, that they are respectable citizens of this county, and that the facts
stated by them are true and duly believe

Given under my hand and official seal, this.....
day of..... 1879.



Charles Pittman, Ordinary
Fulton County

McCrary, J. C.
Fulton Co
 No. 146

APPLICATION FOR

Artificial Leg

FOR CONFEDERATE SOLDIER.

Applicant *J. H. McCrary*

County *Fulton*

Limb *Left Lower Arm*

Amount *\$75.00*

Date of Warrant *Nov 25/74*

Page

G. A. Kelley, Secy
Capt. Fulton's Company
for Arm Pool
Quart.
E. 1952

STATE OF GEORGIA.

Fuller County.
PERSONALLY appears *Thos. C. McGeary* 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 such continuously since the day of 1849; 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 *1st* Brigade; that whilst engaged in such military service, at the battle of *Chickasaw* in the State of *Georgia*, on the *16* day of *March* 1865, he was wounded as follows: *While running from Pickens and crossing the railroad Rail Road he was run over by the cars and his right leg crushed and was from that injury amputated from below the knee*

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

Sworn to and subscribed before me, this *6* day of *June* 1889, *J. H. McGeary*
W. L. Ballard

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

STATE OF GEORGIA.

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

Sworn to and subscribed before me, this *10* day of *June* 1889, *Ordinary*
W. L. Ballard
NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCT. 26, 1889.

No. *89*

Thos. C. McGeary

W. L. Ballard

Fuller

10

June 10

Fuller

W. L. Ballard

Fuller

W. L. Ballard

Fuller

NOTES.

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

STATE OF GEORGIA,

Fulton County.

W. L. Lealborn Ordinary of said county, do certify that I am well acquainted with *Thos. L. McLean* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit:

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

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

Given under my official signature and seal, this *6th* day of *February* 188*9*

W. L. Lealborn Ordinary *Fulton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I, _____ of _____ county, in said State, do hereby appoint _____ of _____

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

In witness whereof I have hereunto set my hand and seal, this _____ day of _____ 188*8*

(L. S.)

Executed in the presence of us:

DIRECTION:

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

STATE OF GEORGIA,

Fuller County.

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

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

Given under my official signature and seal, this 13th day of February, 1899

W. L. Locuston

Ordinary

Fuller

County.

STATE OF GEORGIA,

Fuller County.

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

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

Given under my official signature and seal, this 12th day of Feb, 1891.

W. L. Locuston

Ordinary

Fuller

County.

1890.

APPLICATION FOR ALLOWANCE.

No. 1077

Lester L. McCleary
Applicant, Fuller
County.

Amount, 100.00
Date of warrant, July 13

Entered on record
July 13, 1890

W. H. H.
SECRETARY EXCISE DEPARTMENT

WARRANT HANDLED TO

Applicant

1891.

Application for Allowance

No. 1081

Thomas L. McCleary
Applicant, Fuller
County.

Amount, 100.00
Date of Warrant, July 13

Entered on record
July 13, 1891

W. H. H.
SECRETARY EXCISE DEPARTMENT

WARRANT HANDLED TO

Applicant

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Hullon County.

PERSONALLY appears *John C. McHenry* of *Hullon* county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the

day of *August* 1842, 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 Regt. Col. 1st* of *Georgia* Volunteers *Brigade*; that whilst engaged in such military service, at the battle of *Franklinville* in the State of *Georgia*, on the *13th* day of *November* 1864, he was wounded as follows: *Run over by a team of car crushing the right leg and causing amputation of that limb below the knee which occurred just after the battle at that place*

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 *One Hundred* dollars.

Sworn to and subscribed before me, this *13th* day of *February* 1891.

W. L. Wallace

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,

Hullon County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

county, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *13th* day of *February* 1891.

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,

Hullon County.

PERSONALLY appears *Thomas C. McHenry* of *Hullon* 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 *August* 1842; 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 Regt. Col. 1st* of *Georgia* Volunteers *Brigade*; that whilst engaged in such military service at the battle of *Franklinville* in the State of *Georgia*, on the *13th* day of *November* 1864, he was wounded as follows: *in crushing the right limb on July 13th 1864, causing amputation of that limb below the knee which occurred just after the battle at that place*

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 *One Hundred* dollars, for 1890.

Sworn to and subscribed before me, this *13th* day of *February* 1891.

W. L. Wallace

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,

Hullon County.

Know all Men by these Presents, That I,

of *John C. McHenry* County, State of Georgia, do hereby appoint

of *John C. McHenry* 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 *13th* day of *February* 1891.

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

POWER OF ATTORNEY.
STATE OF GEORGIA,

County, }
Know all Men by these Presents, That I
 of _____ County, State of Georgia, do hereby appoint

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

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

Executed in the presence of us: _____

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

_____ County, Georgia.

*Ms Cray, James Co.
 Fulton Co.*

1893.
Fulton
 No. 1216
Application for Allowance
 For the Year Ending October 31st, 1893.
Lee & Co. Cray
 Applicant, _____
 County, _____
 Date of Warrant, _____
 Entered on record, _____
 1893.
WARRANT
 Secretary Executive Department.
Applicant
 Geo. W. Harrison, State Printer, Atlanta.
W. J. G. L.

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

****LIGHT PRINT AND, OR PAD COPY ****

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Burton County, }

PERSONALLY appears Thomas G. McVary of Burton

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 _____ 1841; 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 72, of State Regiment

of Georgia Volunteers 18th's Brigade; that whilst engaged in

such military service at the battle of Criswellville in the State

of Georgia, on the 18th day of November, 1864, he was

wounded as follows: In crossing the Rail Road track on

a forced march to plant the enemy he was

run over by a freight train the same cutting

off his right leg between the ankle and

about three days

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

One Hundred dollars, for 1892

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

20th day of March, 1893. J. H. McVary

M. B. Lockman County

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

disability, resulting from the wound or disease.

STATE OF GEORGIA, }

Burton County, }

I, E. L. Galloway Ordinary of said County,

do certify that I am well acquainted with Thomas G. McVary the

applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his

said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-

dividual he represents himself to be, and that he resides in this County.

I further certify that _____

before whom the foregoing affidavit was made and power of attorney was signed, is a

_____ of said County, and the said affidavit and

signature thereto are genuine.

Given under my official signature and seal, this 20th day of March, 1893.

M. B. Lockman

Ordinary, Burton County.

STATE OF GEORGIA

POWER OF ATTORNEY

STATE OF GEORGIA.

Fullton County.

I, *W. L. L. Albright* Ordinary of said county, do certify that I am well acquainted with *Thomas R. McCrary* 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 *4th* day of *March* 189*2*.

W. L. L. Albright

Ordinary. *Fullton* 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 *L. O. McCrary*

County *Fullton*

Disability *Loss of leg*

Amount, \$ *100*

Entered on record *March 4* 189*2*.

W. H. HARRISON,

Secretary Executive Department.

AGENT.

Applicant

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

Soldier's Pension.

1894.

No. *1222*

Name *L. O. McCrary*

County *Fullton*

Disability *Loss of leg*

Amount, \$ *100*

1894.

3/24

W. H. HARRISON,

Secretary Executive Department.

WARRANT RETURNED TO

Applicant

Chas. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

PERSONALLY appears Thomas G. McGray 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 day of 1841; 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 State Road Volunteers' Brigade; that whilst engaged in such military service at the battle of Griswoldville in the State of Georgia, on the 18th day of November 1864, he was wounded as follows:

in crossing the Rail Road track on a forced march to flank the enemy he was run over by a freight train the same cutting off his right leg between the ankle and knee about half way

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

One Hundred Dollars for 1891

Sworn to and subscribed before me this 4th day of March 1892.

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.

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 hereto set my hand and seal this

day of March 1892.

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Fulton County.

PERSONALLY appears Thomas G. McGray 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 1841; 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 State Road Volunteers' Brigade; that whilst engaged in such military service at the battle of Griswoldville in the State of Georgia, on the 18th day of November 1864, he was wounded as follows: In crossing the Rail Road track on a forced march to flank the enemy he was run over by a freight train the same cutting off his right leg between the ankle and knee about half way

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

One Hundred dollars, for the year 1893

Sworn to and subscribed before me, this, 4th day of March 1894.

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 Thomas G. McGray the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.



M. 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.

P. O.

County, Georgia.

(For Those Already Enrolled.)

No.

SOLDIER'S PENSION.

1895.

Name F. J. McTeary

County Fulton

Disability Loss of leg

Amount, \$ 100

3/4

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDSD TO

Geo. W. Harrison, State Printer, Atlanta.

McTeary

McTeary, F. J.

Fulton Co.

(For Those Already Enrolled.)

No.

SOLDIER'S PENSION.

1896.

Name F. J. McTeary

County Fulton

Disability Loss of leg

Amount, \$ 100

2/29

1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDSD TO

Geo. W. Harrison, State Printer, Atlanta.

McTeary

McTeary

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 Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.

Personally appears Thomas C. McCrary 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 1841; 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 the 1st Regiment of Georgia Volunteers, 's Brigade; that whilst engaged in such military service at the battle of Priskoville in the State of Georgia, on the 18th day of November 1864, he was wounded as follows: In crossing the Railroad track on a forced march to flank the enemy he was run over by a freight train the same cutting off his right leg between the ankle and knee about half way.

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 One Hundred dollars, for the year 1894.

Sworn to and subscribed before me, this, 9th day of March 1895.

M. L. Calhoun
Notar—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 Thomas C. McCrary the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 9th day of March 1895.



M. L. Calhoun

Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.

Personally appears Thomas C. McCrary 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 1841; 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 the 1st Regiment of Georgia Volunteers, 's Brigade; that whilst engaged in such military service in the State of Georgia, on the 18th day of November 1864, he was wounded, injured or diseased as follows: In crossing the Rail road track on a forced march to flank the enemy he was run over by a freight train the same cutting off his right leg between the ankle and knee about half way.

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, 1895. I have heretofore as a resident of Fulton County been allowed a pension of One Hundred dollars, for the year 1894.

Sworn to and subscribed before me, this, 16th day of February 1895.

M. L. Calhoun
Notar—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 Thomas C. McCrary the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 26th day of February 1895.



M. 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 Thomas C. McCrary the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.

Given under my official signature and seal, this 9th
day of March 1895.



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 Thomas C. McCrary the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 May 1896.



W.L. Calhoun

Ordinary Fulton County.

Audited

Feb. 6th 1889.
Wm. A. Mingle
COMPTROLLER GENERAL

Voucher No. 89

Amount \$ 100

Paid to Thos. C. McCrary
For Loss of Right
Leg.
Feb 6, 1889.

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK

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

Applicant

Audited

18

COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. 1077

Amount \$ 100.

Paid to Thos. C. McCrary
For Loss of Leg

July 13 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK

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

Applicant

No. 89
STATE OF GEORGIA, }
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Feb 6 1889

Mr. Thomas O. McCreary 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

Loss of Right leg
He is entitled to receive the sum of One Hundred & 00/100 Dollars
for such disability, the same being due for the year ending October 24, 1889.

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

By the Governor

H. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

\$100.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100 Dollars,
per above voucher, this 6th of Feb. 1889.

Thomas O. McCreary

No. 1077
STATE OF GEORGIA, }
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Feb 13 1889

Mr. Thomas O. McCreary 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

Loss of leg
He is entitled to receive the sum of One Hundred & 00/100 Dollars
for such disability, the same being due for the year ending October 24, 1889.

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

By the Governor,

H. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

\$100.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100 Dollars,
per above voucher, this 13th of Feb. 1889.

Thomas O. McCreary

W. A. FULLER

OFFICE

STREET & BOWLING

FULLER & BOOLITTLE,

COMMISSION MERCHANTS,

Dealers in Staple & Fancy Groceries & Country Produce,

TENNESSEE PRODUCE ALWAYS ON CONSIGNMENT.

148 & 139 MARIETTA STREET.

Goods delivered Free to any part of the City,
in neat packages and in good order.

Atlanta, Ga. Dec 17 1891.
To Whom it may concern: This is to certify
that I have this day delegated and do by
these presents delegate (with N. H. Cray) to
do me in the matter of obtaining a wooden leg
or in lieu thereof the price in cash & he is
fully authorized & requested to acknowledge
in my name in the premises & to sign
for & receive the same check or option.

Witness J. M. Cray

J. H. Cray

Personally came before me a notary
for the Mr. J. H. Cray who being duly
sworn, deposed and said on oath
that he was a member of Capt. W. H.
Fuller's company & was on detailed duty
when he lost his leg. J. H. Cray

I, James B. Substantive, appeared me
This December 19th 1891. Will & peace at the City of Ga.

Audited _____ 1891.

COMPTROLLER GENERAL

Mr. Cray, J. C.

Fuller

1891.

Maimed Soldiers.

Voucher No. 681

Amount \$ 10.00

Paid to J. H. Cray
For Loss of leg

1
Dec 12 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK

Geo. W. Harrison, State Printer, Atlanta.

applied

This December 18th 1891

1891.
No. 684
STATE OF GEORGIA, }
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Dec. 12 1891.

Mr. J. L. McCreary of the County
of Dublin 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
1000 of leg One Hundred Dollars
He is entitled to receive the sum of _____
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

By the Governor,

M. H. Harrison

Sec'y EXECUTIVE DEPARTMENT.

\$100

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

One Hundred 00/100 Dollars,
per above voucher, this 12 of Decy 1891.

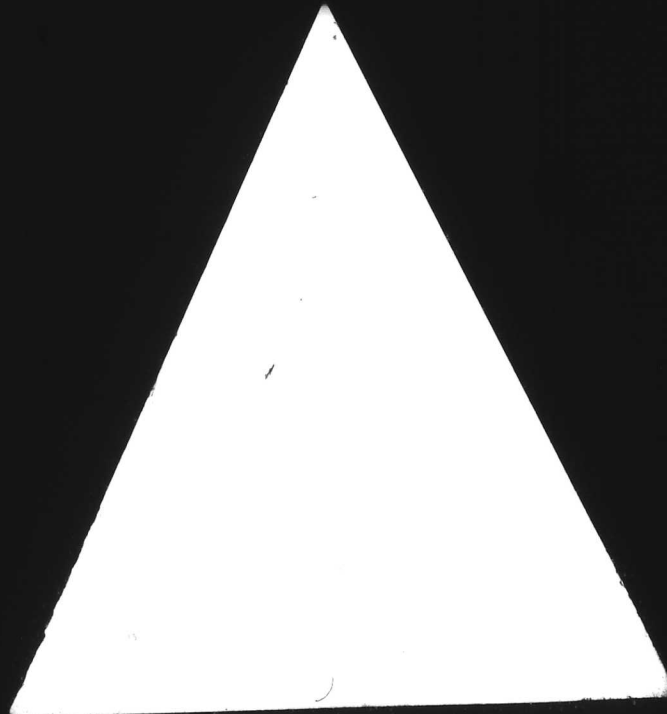
J. L. McCreary

\$100

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

One Hundred 00 1/4 Dollars,
per above voucher, this 17 of July, 1891.

J. L. McGeary



THE END
MICROFILMED FOR
GA. DEPT. OF
ARCHIVES AND HISTORY

(PENSION APPLICATIONS OF CONFEDERATE SOLDIERS AND WIDOWS WHO APPLIED FROM GEORGIA)

Title LEE, (MRS) ELIZABETH
(WILLIAM O.)

THRU

McCRARY, T. C. (THOMAS C.)

FULTON COUNTY

FULTON COUNTY

Volume

GCP
198
GCP

Number

2892139-198

2892139

I CERTIFY I WAS THE OPERATOR WHO
PHOTOGRAPHED THIS FILM.
IN ATLANTA, GEORGIA, AUGUST 31, 1962

J. P. Surles
Operator

J. P. SURLS

15X - V

DATE

1128

MANN FILM LABORATORIES

END



A
Microfilm Publication
of the
State of Georgia
Department of Archives
and History

Ben W. Fortson, Jr.
Secretary of State
Mrs. Mary Givens Bryan
Archivist

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

William H. Fagan 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). John McPherson

2. How long and since when have you been a continuous resident citizen of this State?

Since 1868
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1908? Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service). In Company H, 1st Georgia Infantry, at Atlanta, Ga., April 1862.

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge). Until the surrender of the Army of Northern Virginia on April 9, 1865.

6. When and where was your Company and Regiment surrendered or discharged from the Service? At Appomattox Court House, Va., on April 9, 1865.

7. Were you actually present with your Command when it was surrendered or discharged? Yes.

8. If you were not actually present, state specifically and clearly where you were.

a. Where was your Command when you left it? at Appomattox, Va.

b. When did you leave the Command? April 10, 1865.

c. For what cause did you leave? Surrender of Confederate Army.

d. By whose authority did you leave? Parole by U.S. Army.

e. For how long was your leave granted? In what way? Parole.

f. Why did you not return to your Command after leave expired?

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war? Yes at Sharpsburg

j. If so, when, and where? In what prison were you held and when were you released? March 1865, at Richmond, Va. Released in 1865.

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) My property except wearing apparel worth not over twenty-five dollars.

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 except wearing apparel worth not over twenty-five dollars.

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? Nothing - not over ten dollars per month.

13. Are you drawing a pension of any amount from this State or the United States? No.

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No.

I swear to and subscribed before me, this the

John McPherson 1011

William H. Fagan Ordinary,

Fagan County.

Soldier's Application.

UNDER ACT 1910.

Confederate

County Butler

Name William H. Fagan

Company

Regiment

Approved

J. W. LINDSEY,

Commissioner of Pensions.

CHAS. F. BYRD, STATE PRINTER, ALBANY.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Attorney County.

J C Seal

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

1. What is your name and where do you reside? J C Seal
2. How long and since when have you known William Logan the applicant? Since 1862
3. Where does he now reside, and since when has he been a bona fide, continuing resident in the State and how do you know? He lives in the State of Georgia; He has been a resident of that State since 1868
4. When, where and in what Company and Regiment did he enlist during war from 1861 to 1865? (Give date and place.) Company A, 1st Regt. Ala. Inf. 1861
5. How did you obtain your information of this Service? From service in same Company
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) From April 1862 to 9th April 1865
7. When and where was his Command surrendered or discharged (Give date and place) At Fort Fisher, N.C. April 9, 1865
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there? I was at home at that time on the Seal list
10. Was the applicant personally present with his Command at surrender? Yes
11. If not where was he and how came him there?
12. When did he leave his Command? April 9, 1865 Where was his Command when he left it? At Fort Fisher, N.C. for what cause did he leave? Surrendered By whose authority did he leave? U.S. Grant and how long was he granted leave? Indefinite Period How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) My own knowledge. I saw him immediately after his return
13. In what way was he prevented from returning to his Command? How do you know? His Command had surrendered
14. What effort did he make to return to his Command and how do you know? Now
15. Was applicant captured as a prisoner? Yes If so, when and where? At Fort Fisher, N.C. In what prison was he held? At Ft. Mifflin, Pa. and when released

Sworn to and subscribed before me, this the 9th day of Oct 1911

J C Seal

County.

of Seal County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Seal County.

Personally before me comes E. H. Bryant and C. M. Lusk who on oath says that they are freeholders residing in said County and we know William Logan 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.)

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? I do not know
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? Sold to the wife
6. Was the disposition of this property made in good faith and full value? Yes as far as I know or was it made to obtain a pension? No as far as I know Sworn to and subscribed before me, this the 9th day of Oct 1911 E. H. Bryant C. M. Lusk

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Seal County.

I, John P. McWhorter, Ordinary of said County, certify that I know the applicant, William Logan for Pension is the person he represents himself to be and resides in said County. That I also know the witness swearing to the service and E. H. Bryant and C. M. Lusk 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 Seal shows that W. H. Logan and wife value for tax in 1908 \$ 700 for 1909 \$ 700 for 1910 \$ 700 Sworn under my hand and official seal of office this 9th day of Oct 1911 John P. McWhorter, Ordinary, Seal County.

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

GEORGIA, Fulton County.

I, Arthur R. Moulton Es., Ordinary of said county, do certify that I personally know Wm. Mattie Logan, the applicant, and that she is the lawful widow of Wm. Logan, and was on the Deceased Pension Roll of said Fulton county, and was paid a Pension from Fulton county for 1918, and at the time of his death on the 4 day of Dec, 1918, there was due to him and unpaid his Pension of Nine & 1/2 Dollars from the State of Georgia, and I know W. R. Brown, 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 day of April, 1919

Arthur R. Moulton Es., Ordinary,
Fulton County.

Logan, Wm
Fulton County

No. 1919

Application for Pension Due Deceased Soldier
UNDER ACT 1891

To be paid the Widow or Dependents Children

BY
Mrs. Mattie Logan
Widow of Wm. Logan
of Fulton County

Co. _____ Regt. _____ Vols. _____

Approved and paid 4/21 1919

J. W. LINSEY,
Commissioner of Pensions.

Recd Dec. 4 1918.

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 1918, through my deceased husband, _____ who was on _____ Pension Roll and paid from _____ for 1918.

Witness my hand this _____ day of _____ 1918.

Attested before me: _____

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. Mattie Logan, of said county, after being duly sworn, on oath says that she is the widow of Wm Logan who was duly enrolled as a Serviceman Pensioner from the county of Fulton and was paid a Pension of Eighty Dollars from Fulton county for 1918, and that the said Wm Logan died in Fulton county on the 4 day of Dec, 1918, and at the time of his death a Pension of \$1000 was due him from Fulton county and unpaid for 1919. Applicant further swears that she married the said Wm Logan on the 20 day of November, 1871, in Monroe county and State of La, 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 April, 1919.

William R. Warburton Ordinary, Mrs. Mattie Logan (L. S.)
Fulton County, Maine

AFFIDAVIT OF WITNESS.

GEORGIA, Fulton County.

Personally before me comes W. E. Brown, who on oath says that he knew William Logan while in life and that he knows Mrs. Mattie Logan the above applicant; that he knows that the said William Logan and Mattie Norris were in due form of law married in the county of Montgo in the State of Georgia on the 20 day of November, 1871, and that they resided together as husband and wife from date of marriage to the day of his death on the 4th day of December, 1918, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 18 day of April, 1919, W. E. Brown.

W. E. Brown Ordinary, W. E. Brown
Fulton County, Maine

the above applicant; that he knows that the said William Logan
and Mattie Norris were in due form of law married in the county
of Montee in the State of Georgia on
the 20 day of November 18 71, and that they resided together
as husband and wife from date of marriage to the day of his death on the 4th day
of December 1918, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 18 day of April 1919, 1919.

W. H. Duff, Ordinary.
Eulton County.

W. R. Duff

Note here—This form can be used by guardian or minor children where there is no widow.
26—Ordinary must send in all cases certified copy of marriage license attached.

Proctor, Officer
4/12-1911
The State of
of property & cents
10000.00
Set off debts
against & natural
of property
of property
Cash of 10000.00

Logue, John J.
Gulston, Virginia
OK for 1913
6. 1912
Confederate

Soldier's Application.

UNDER ACT 1910.

County Gulston
Name John J. Logue
Company 16th
Regiment 16th

Approved _____

J. W. LINDSEY
Commissioner of Finance

CHAS. E. BYRD, State Printer, Raleigh

1894
ENTERED ROSTER OFFICE

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

County.

Personally before me comes _____ who on oath says that they are freeholders residing in said County and we know the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.)

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.)

2. When and to whom was it sold or given to?

3. What was the price paid or stated to be paid?

4. What relation is the party to applicant?

5. What disposition was made of the proceeds of the sale?

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

Sworn to and subscribed before me, this the _____ day of _____ 1911.

Ordinary.

County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

County.

Ordinary of said County, certify that I know the applicant _____ for Pension is the person he represents himself to be and resides in said County. That I also know _____ the witness swearing to the service and _____ 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 _____ shows that _____ and wife value for tax is in 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____

Sworn under my hand and official seal of office this _____ day of _____ 1911.

Ordinary.

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 and wife, affidavits of freeholders unnecessary.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

County.

I, _____ of said State and County, hereby apply for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with my testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office). *J. J. Squire 161 Ashby St. Atlanta Georgia*
2. How long and since when have you been a continuous resident citizen of this State? *30 years & since 1881*
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 in Tennessee in 1861*
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service). *1861 - Warren County, Tenn. Company D. 16th Tenn*
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge). *About 17 months or 18 months*
6. When and where was your Company and Regiment surrendered or discharged from the Service? *in 1865 - Smith River where it surrendered*
7. Were you actually present with your Command when it was surrendered or discharged? *Yes*
8. If you were not actually present, state specifically and clearly where you were. *Atlanta Georgia - during the march to Smith River*
- a. Where was your Command when you left it? *in Atlanta Georgia and Commanded on way to Smith River*
- b. When did you leave the Command? *in November 1865*
- c. For what cause did you leave? *Business - before he would surrender*
- d. By whose authority did you leave? In what way? *By the Regimental Surgeon*
- e. For how long was your leave granted? In what way? *Three months - before he would surrender*
- f. Why did you not return to your Command after leave expired? *He was discharged*
- g. In what way were you prevented? *Discharged in Georgia*
- h. What effort did you make to return? *Right for 6 months*
- i. Were you captured during the war? *Yes*
- j. If so, when, and where? In what prison were you held and when were you released? *June 1862 - in Smith River Georgia Penitentiary*
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.) *161 Ashby St. Atlanta Ga \$1600.00*
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? *None*
11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list). *See list above*
12. What annual or monthly income or earnings of yourself and wife and the source derive from you? *only my own earnings from the 1st of July 1900*
13. Are you drawing a pension of any amount from this State or the United States? *Yes*
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? *Yes*

Sworn to and subscribed before me, this the _____ day of _____ 1911.

Ordinary.

County.

Proctor's office
6/12-1911
The Court notes
of proper taxes
100% correct
Set off debts
against natural
of proper
H. B. Boring
Case of 1911

Logue, John J.
Captain Quincy
OK for 1913
6 May 8, 1912

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County Dulton
Name J. J. Logue
Company 16th
Regiment Infantry

J. W. LINDSEY
Commissioner of Prisons

ENTERED ROSTER OFFICE
11/19/11

For witnesses to answer before
Judge or County Judge of Term.
QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Harborside County.

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

1. What is your name and where do you reside? John J. Logue
Harborside
2. How long and since when have you known J. J. Logue the applicant?
all of our lives or since 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? Atlanta Ga. met him since
was heard of him say & perhaps to ask him for
4. When, where and in what Company and Regiment did he enlist during
war from 1861 to 1865? (Give date and place) 1861. at Milledgeville, Ga. to
5. How did you obtain your information of this Service? was with during
part of the war
6. How long within your own personal knowledge did he perform actual military service with
this Company and Regiment? (give date) do not not know less than long
7. When and where was his Command surrendered or discharged (give date and place)
in Greensboro N. C. in 1865
8. Were you personally present at the surrender? was not
9. If not, where were you and how came you there? I was at Milledgeville, Ga. and
was with him from 1861 to 1865 and was with him from 1861 to 1865
10. Was the applicant personally present with his Command at surrender? do not know
11. If not where was he and how came him there? See his affidavit
which we have my reason to believe true
12. When did he leave his Command? Where was his Command
when he left it? for what cause did he leave?
By whose authority did he leave and how
long was he granted leave? How do you know
all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)
do not know his statement true
13. In what way was he prevented from returning to his Command?
How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? If so, when and where?
In what prison was he held? and when released?
See his affidavit

Sworn to and signed before me, this the
1911

Or

15. Was applicant captured as a prisoner? If so, when and where?
 In what prison was he held? and when released?
See this affidavit
 Sworn to and before me, this the
 191
 Or:

We further state, We were wounded, at Misfiedon
 & Missionary Bridge & never with Com any
 more but believe his statement to be true & correct
 being as man of honor & integrity.
 Our knowledge of his service, the more we know of him
 he was a good Soldier & efficient where ever placed
 J. W. H. Mack was wounded during at Miss Ridge in
 1863 & carried to Atlanta & placed in Hospital where
 I found said applicant then as Hospital Steward on
 some position who administered to my wounds, kindly
 & efficiently.

Members of the W. C. Homack
 16th Tenn. Inf. Regt. Agt. Savage Hill Camp 30
 Cold Springs, Tenn.

subscribed & sworn to before me
 this 21st day of Sept 1911
 J. J. Gessler, Clerk

Loague, J. J.
Testimony
on April 1916
for the 12th
6th Regt 100th
 Testator COUNTY
 Application to be Allowed Pension for
 Total Blindness Under Act of General
 Assembly of August 19, 1912.
 NAME *J. J. Loague*
165. Ashby St
 COMPANY *10.*
 REGIMENT *16th Tenn.*
 10/30/15

JESSE WALLING PRESIDENT

J. W. WALLING CASHIER

J. W. WALLING ASST. CASHIER



City Bank & Trust Co.

CAPITAL STOCK \$75,000.00

McMINNVILLE, TENN.

Rev. T. J. Beach and Jesse Walling, have examined the affidavit of Jno. J. Logue, which is true to the best of our knowledge and belief, as we were with him and his family in Tennessee during April and May 1861.

From Tennessee we went to Virginia, then to North Carolina and afterward to the coast of South Carolina.

On April 10th, 1862 we left by way of Allenton for North Carolina. The applicant, J. J. Logue, dropped out during this march and was sent to hospital because of his being sick.

T. J. Beach and said Logue remained at the hospital, Logue being a steward of the hospital.

Jesse Walling was wounded during the Battle of Murfreesboro in 1863 and was given his honorable discharge.

The statements made by Jno. J. Logue in his affidavit are correct with regard to our campaign during 1861 and 1862 as we remember it well.

*Jesse Walling has one of
Havag, W. H. H. 930
W. C. Hornum, Capt.
Savage Hawk Camp 930*

*Sworn to and subscribed before me
J. J. Logue*

Application for Pension for Total Blindness

Under Act August 19, 1912

STATE OF GEORGIA.

Fulton COUNTY.

Personally before me, the undersigned Ordinary of said County, comes *J. J. Logue* who after being duly sworn on oath says, That he is on the *General* Pension of the State of Georgia as a member of Company *10*, Regiment *16th Tenn.* C.S.A. Vol., of *Georgia-Missis.* and has been paid a pension of Sixty Dollars annually, and was so paid in 1915. That he has become totally blind by reason of *(State cause that produced blindness)*

And that he makes this application that he may be allowed an increase in his pension for total blindness.

Sworn to and subscribed before me

this *23* day of *Oct.*, 1915.
Wm. Robinson Ordinary.
Fulton County.

J. J. Logue

STATE OF GEORGIA.

Fulton COUNTY.

Personally before me, the undersigned Ordinary of said County, comes *Wm. J. W.* who, after being duly sworn, on oath says: That he is a resident of *Atlanta-Fulton* County, and that he is a practicing physician, and has been for *19* years, and that he knows *J. J. Logue* of said County. That he is NOW and has been for the past *21* years totally blind; which blindness was the result of *Neuritis (also catarrh)*

Sworn to and subscribed before me

this *23* day of *Oct.*, 1915.
Wm. Robinson Ordinary.
Fulton County.

J. J. Logue

STATE OF GEORGIA.

Fulton COUNTY.

ORDINARY'S OFFICE,

Oct 29, 1915

I, *J. J. Logue*, being the Ordinary of said County, do certify that *J. J. Logue* is on the *General* Pension Roll of *Fulton* County, and has been paid a pension of \$ *Sixty* for 1915, and that he is a bona fide resident of said County, and that he has become totally blind. That he knows Dr. *J. L. Thomas*, who is a resident practicing physician of said County, and is a truthful man and physician of high standing, and what he says is worthy of belief and credit.

Given under my hand and official seal, and signed this day and year above stated.

(SEAL)

Wm. Robinson Ordinary.
Fulton County.

GEORGIA)
FULTON COUNTY)

Affidavit of Jno. J. Logue.

In person comes John J. Logue who, on being duly sworn, on oath says that he desires to amend and extend his statements as to the period of his service in the Confederate States Army and he says that he enlisted as a Private in Company "D" of the Sixteenth Tennessee (Confederate) Regiment and he, with his Regiment was mustered into the service the _____ day of April, in 1861 at McMinnville, in Warren County, Tennessee, and served continuously with his Company and Regiment more than six months; that from the date of enlistment he served regularly up to and until the day he was captured by the enemy, the Federals, on the _____ day of June, 1862, about fourteen miles from Chattanooga, and he was then transported to Nashville, Tennessee, and was imprisoned and confined in the State Penitentiary at Nashville, and in July, 1862, he made his escape by the aid of a woman friend, Mrs. Nicholson, in a disguise, after he had been condemned and sentenced to be shot, under a charge of being a spy and was to have been so executed the following morning. After his escape he made his way back into the Confederate lines and re-joined his command and continued to serve until November 1862, when he became sick and was unable for duty and by order of leave of the Regimental Surgeon he was granted leave of absence indefinitely, and was assigned to a Hospital for treatment and recuperation, and continuing in feeble condition and unable for active field duty he was discharged or released from field duty and was assigned to duty as a steward in the Confederate Hospital in Atlanta, Georgia, and was so held in _____ and under such duty until after the Battle of Chickamauga in 1863, when the Hospital was removed from Atlanta, Ga., to Macon, Ga., and then he was sent to Columbus, Ga. and he served then in the Hospital Service and Medical Department until the termination and close of the War, and at the close of the War he was in Atlanta, Ga.

He was married in Atlanta, Ga., in August 1863, to Miss Katie P. Shivers, who is yet living as his wife.

Affiant presents the following statement as to his service. Was in service about three months before the First Battle of Manassas; his Regiment was in bivouac in Camp Trousdale, above Nashville, near Kentucky line; First Brigadier General was Felix K. Zollicoffer of Tennessee; ordered from Camp Trousdale to go to the First Battle of Manassas, go to Lynchburg, Va., and waited for transportation when we learned that the battle was over. Ordered then to Hunterville, Va., got off at Millboro Depot and marched to Hunterville, struck camp there, awaiting further orders. Ordered then to Cheat Mountain and was out in that wilderness four days without rations. General Zollicoffer was succeeded by Colonel Sumner. Our Regiment was in the center, Loring on the left, Lee on the right. We were to lead in the attack. Colonel Washington was killed. Lee came to us on Cheat Mountain. We saw the enemies' tents. We lay in ambush Fulton's 7th Tennessee, Savage's 18th Tennessee (my Colonel in command) and Brumby's 14th Georgia Regiment. At that place it was learned that the enemy had reported that the Confederates, ("Rebels", as they said it) had been reinforced by about 5,000 Savages, getting their confusion in this way from reports about our Colonel Savage's Regiment, in the skirmish at Big Spring near Greenbrier Bridge, my command Colonel Savage's Regiment, 16th Tennessee, was ordered to Russell Mountain, Brumby's 14th Georgia Regiment was left at Big Spring, and Fulton's 7th Tennessee at Green Brier Bridge. Colonel Savage and a guide led the Brigade. General Donaldson gave orders that "there should be no talking"; Colonel Savage coming in command reversed the order and gave the command to "yell like hell". Rosecrans (Federal) was on Big Sewell and we were on Little Sewell, and when the Yankees heard our "Rebel yell" they fled in a hurry and confusion.

Our command was then ordered to Pocotaligo, S. C. January 1st, 1863, and then to Beaufort, S. C. Stopped at Gardner's Corner, and when it was reported the enemy were crossing in heavy force. General Pemberton was in command. Colonel

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Jones, of South Carolina Cavalry, got scared and stampeded. He was ordered to resume his position, and he refused to obey the order. Colonel Savage and his command guarded the coast that night, twenty privates were detailed, with non-commissioned officers. Affiant was one of the men so selected to go out of Company "D". Colonel Savage led us down to the water and he rode out on the causeway and placed the pickets himself. Our command remained about there on the coast about six months. We were then ordered to Shiloh. On the way going there I had a relapse of the fever and was sent to a hospital and was very sick for a considerable time, and was unable to re-join my command. When I became convalescent and able to get about again I was assigned to special duty as steward at the hospital in Atlanta, Ga. Later Dr. John V. Westmoreland organized a Company and we went with Captain Olen C. Green as far as Cedar-town and there we learned that General Forrest had captured General Streight's command, of the enemy, and was on the way to Atlanta. I was convalescent and after Atlanta was evacuated the Hospital Corps was ordered to Macon. I was there in Macon sick on the bed when General Stoneman's raid came there. I managed to get off the bed and went out to the lines of defense and helped to repel Stoneman, and was there when he and his command were captured by General Iverson. I captured a horse there with "U.S." brand on him and I was there held up by the Confederates who were mistaken in supposing that I was a Yankee.

Affiant says that at the present time he does not own any property of as much value as \$1800.00. All he has is a horse and buggy and a second-hand wagon, all together, not worth over \$250.00. The cottage wherein he and his wife reside is her own property and is not his own and it never was his and it is encumbered by a mortgage of \$2,000.00. No other property at hand. Affiant is now 75 years of age, in feeble physical condition, very nearly blind, not able to do any heavy or hard manual labor and not able to make a support by manual labor, and he can not earn over or about an average of \$50.00 or \$35.00 per month, out of which he has the expense of his own living and for his wife and his horse feed and clothing for self and wife and incidental expenses. Affiant says that he needs the aid of a pension as provided by law.

Wherefore he asks and prays that the pension allowed by the Law of Georgia may be granted to him.

Sworn to and subscribed by
John J. Logue, Affiant, before me, September 24, 1912.

John P. Wilkinson
Ordinary, Fulton County, Ga.

Colonel Schuldsch. Our Regiment was in the center, Loring on the left, Lee on the right. We were to lead in the attack. Colonel Washington was killed. Lee came to us on Cheat Mountain. We saw the enemies' tents. We laid in ambush Fulton's 7th Tennessee, Savage's 15th Tennessee (my Colonel in command) and Brumby's 14th Georgia Regiment. At that place it was learned that the enemy had reported that the Confederates, ("Rebels", as they said it) had been reinforced by about 2,000 Savages, getting their confusion in this way from reports about our Colonel Savage's Regiment, in the skirmish at Big Spring near Greenbrier Bridge, my command Colonel Savage's Regiment, 15th Tennessee, was ordered to Sewell Mountain, Brumby's 14th Georgia Regiment was left at Big Spring, and Fulton's 7th Tennessee at Green Brier Bridge. Colonel Savage and a guide led the Brigade. General Donaldson gave orders that "there should be no talking"; Colonel Savage coming in command reversed the order and gave the command to "yell like hell". Rosecrans (Federal) was on Big Sewell and we were on Little Sewell, and when the Yankees heard our "Rebel yell" they fled in a hurry and confusion.

Our command was then ordered to Pocotaligo, S. C. January 1st, 1862, and then to Beaufort, S. C. Stopped at Gardner's Corner, and when it was reported the enemy were crossing in heavy force. General Featherston was in command. Colonel

Wherefore he asks and prays that the pension allowed by the Law of Georgia may be granted to him.

Sworn to and subscribed by
John J. Logue, Affiant, before me, September 24, 1912.

John R. L. Johnson
Ordinary, Fulton County, Ga.

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 Dustin

Name Wm. H. Logan

Widow of J. J. Logan

Company D

Regiment 16th Va. Inf.

Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Index Printing Co., State Printers, Atlanta.

11/25-1918

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Fulton COUNTY

Personally before me comes Mrs Kate F. Toque of said County, who, after being duly sworn, on oath says, that she is the widow of J. J. Toque to whom in the County of Fulton State of Georgia she was married on the 25 day of Aug 1863, and that she remained his wife, and resided with him to the date of his death in Mich 18 1918 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in Georgia said State of Georgia, and he was on the State Pension Roll of the State and paid a pension of \$ 100.00 in Fulton County for 1918 per annum, on account of being a soldier in Company 16th Regiment of Team (Volunteers of State Militia)

At the death of J. J. Toque 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.) None

Acres land	\$
Horses and Mules	\$
Hogs, Cows, etc.	\$
Total Cash value of all property	\$

That she is now a bona fide resident citizen of said County of Fulton and she has so continuously resided since August day of 1889

Sworn to and subscribed before me, this the 6 day of July 1918, Mrs Kate F. Toque
Arthur R. Maloney 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 J. P. Harrison known to be responsible and truthful persons, residing in said County who after having duly sworn on oath, say: that of their his own personal knowledge Mrs Kate F. Toque who made the foregoing affidavit, is the lawful widow of J. J. Toque who died in Fulton County in said State of Georgia on 25 day of March 1918, and that she has not since remarried. That she became the wife of to the day

18 and that she and he had resided together as man and wife continuously since date of his day of death 18 and that he was the same man who was on the pension roll of said State Georgia from Fulton when he died.

Sworn to and subscribed before me, this the 6 day of July 1918, Arthur R. Maloney Ordinary,
of Fulton County.

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 Mrs Kate F. Toque
Widow of J. J. Toque
Company 16th
Re-Entry 16th
Approval 16th

J. W. LINSLEY,
Commissioner of Pensions
Under Printing Co. State Printing House

11/28-715

THE STATE OF GEORGIA
COUNTY OF FULTON

J. C. Gordon, being first duly sworn, upon his oath deposes and says:

That he over twenty-one years of age and competent to make this affidavit; that he was acquainted with Mrs. Kate F. Rogers, who was married to J. J. Rogers; that a friend was present at a last man, the widow of Mrs. Kate F. Rogers, (at the time, J. J. Rogers) and J. J. Rogers, which was first taken place in the city of Atlanta, Georgia on the 25th day of August, 1908.

J. C. Gordon

Subscribed before me on this the 17th day of April, 1918.

R. J. Davidson
Notary Public, Fulton County,
Georgia.

My commission expires
June 1st, 1919.

AFFIDAVIT OF TWO FREEHOLDERS

STATE OF GEORGIA, _____ County

Personally before me comes _____ who after being sworn on oath says, that they are freeholders of said County, and that they know _____ of said County and knew her said husband _____ at his death on the _____ day of _____ 1918 that she and he were in the use, possession and control of the following property to-wit: _____

of the value of \$ _____ that she is now in the use, possession and control of the following property at his death to-wit: _____

of the value of \$ _____

Sworn to and subscribed before me, this _____ day of _____ 1918

Ordinary,

of _____ County.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA, Fulton County

I, Arthur R. M. M. M. M. Ordinary of said County, do certify, that, I know Mrs. Kate F. Rogers, 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 July 6 1918

That I also know _____ witness as to marriage and I also know _____

who I know to be a resident freeholder 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 \$ 1300 for 1908, \$ 1300 for 1909, \$ 1300 for 1910, \$ 1300 for 1911, \$ 1400 for 1912, \$ 1400 for 1913, \$ 1400 for 1914, \$ 1650 for 1915, \$ 1650 for 1916, \$ 1650 for 1917, \$ 1650 for 1918.

Sworn under my hand and official seal of office this 19 day of Oct 1918

(SEAL)

Arthur R. M. M. M. Ordinary.

Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked 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, 1910, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some general reputation.

that the tax books of _____ County shows that _____ returned property to the
amount of \$~~1387~~ for 1908, \$~~1325~~ for 1909, \$~~1300~~ for 1910, \$~~1305~~ for 1911, \$~~1490~~ for
1912, \$~~1490~~ for 1913, \$~~1490~~ for 1914, \$~~1490~~ for 1915, \$~~1650~~ for 1916, \$~~1490~~ for 1917,
\$~~1490~~ for 1918.

Sworn under my hand and official seal of office this 19 day of Oct 1918

(SEAL.)

Arthur R. Marent Ordinary.

Frederick County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked 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 general reputation.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton County, Georgia.

I, Miss Alice Lolley

do hereby authorize

Thos. J. Burke

of Atlanta, Fulton County, Georgia,

to receive and receipt for the pension allowed and that he

remits the same to me at Atlanta

by the check or registered mail

Witness my hand this 14th day of March

1901

Executed in presence of

Pauline Ordinary,

Miss Alice Lolley

L. S.

{
SEAL
}

Lolley, Alice (ms)
Fulton County

No. AK

WIDOW'S
Indigent Pension.
1901.

Name Alice Lolley

County Fulton

Widow of Thos Lolley
OK. 3-4a

Approved _____ 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

4/15/01

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton County. }
 I, Mrs. Ibbie Lokey hereby authorize H. P. Brooke
 of Atlanta, Fulton County, to receive and receipt for the pension allowed and that he
 remit the same to me at Atlanta by his check or registered mail.

Witness my hand this 14th day of March 1901

Executed in presence of

Ordinary,

Mrs. Ibbie Lokey
mark

L. S.

(SEAL)

Questions for Applicant.

STATE OF GEORGIA.

Fulton County. }

I, Mrs. Ibbie Lokey of said State and County, desiring to
 avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
 passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the
 following questions, deposes and answers as follows:

1. What is your name and where do you reside? (*Give State, County and Post Office.*)
Mrs. Ibbie Lokey, Atlanta, 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? Cobb County, 1844
4. When and where was your husband born—state his full name, and when were you and he married?
1844, Thompson Ga., Thomas Lokey, married
April 1861
5. When and where, and in what Company and Regiment did your husband enlist or serve during the
 war between the States? In 1861, 1861, Augusta, Ga., Company
K. 2nd Regiment Georgia Volunteers
6. How long did your husband, serve in said Company and Regiment? Until war ended
Capt. Mullidge Whitley Company, Nelson's Battalion,
In Virginia 1863, Discharged in August 1863
7. When and where did your husband's Company and Regiment surrender and was discharged?
In Virginia 1863, Discharged in August 1863
8. Was your husband present at the time and place when his Company and Regiment surrendered?
He was
9. If not with his command at surrender, state clearly and specifically where he was, when he left com-
 mand, for what cause, and by what authority? He was with his
Command
10. When and where did your husband die? 1887, Augusta Ga.,
Georgia
11. Which of the following grounds do you base your application for Pension, viz: First—Age and
 Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty? Age & Poverty
and Infirmity and Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn
 your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon
 the third, state whether you are totally blind, and when and where you lost your sight.
About 5 years. I can't take down and can
not work regular.
13. What has been your occupation since your husband's death? Without
14. How much can you earn gross, by your own exertion or labor? Very little.
15. What property, real or personal, or income do you have or possess, and its gross value?
None
16. What property, real or personal, did you possess at death of husband or he left you, and of the year
 1899-1900, and what disposition, if any, by sale or gift, have you made of the same? None of all
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Fulton County. I had none to return.
18. How have you been supported since death of husband, and especially for 1899 and 1900?
Chiefly by Charity.
19. How much did your support cost for each of those years, and how much did you contribute by your
 own labor or income? I did not work, and I was very poor
20. What was your employment during 1899 and 1900—how much did you receive for each year?
I worked some in cotton fields, but enough to live,
hardly enough on.
21. Have you a family? If so, who compose such family? Give their means of support. Have they
 any lands or other property? I had 2 girls & two boys they are all good to me
and no wife
22. Have you ever made an application for pension before? No
23. How many applications have you made for a Pension, and under what class? This is the
only one

Sworn to and subscribed before me this 14th

day of March 1901

John R. Williams Ordinary,
 of Fulton County.

} Mrs. Ibbie Lokey
mark

Lokey, Ibbie (ms)
Fulton County

No. OK

WIDOW'S
 Indigent Pension.
 1901.

Ibbie Lokey
Fulton
M. 3-4a

1901.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

1901.

JOHN W. LINDSEY, State Printer, Atlanta, Ga.

4/5/01

Questions for Witnesses.

STATE OF GEORGIA,

Fulton County.

Call R. H. Mullidge & C. King, of said State and County, having been presented as a witness in support of the Application of Mrs. *Theresa Loke* for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *R. H. Mullidge 17 E. P. E. St. Atlanta Ga.*
2. Are you acquainted with the applicant, Mrs. *Theresa Loke*? *Yes*
- If so, how long have you known her? *I know her for years.*
3. Where does she reside, and how long and since when has she been a resident of this State? *Atlanta Ga. Lived in the State of Ga. all her life.*
4. When and where was she born? *1844*
5. Were you ever acquainted with her husband? *Yes*
6. Where did he reside in 1861? *Augusta Ga.*
7. When and to whom was he married? *1864 to Mrs. Eliza Sexton.*
8. When and where was he born? *1844*
9. How long have you known him? *4 years*
10. When and where did *Theresa Loke* enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this? *1861, Augusta Ga., Company K, 35th Regiment, Iowa Cavalry Co.*
11. Were you a member of the same Company and Regiment? *No*
12. How long did he perform regular military duty? *He was discharged 1866*
13. When and where was his Company and Regiment surrendered and discharged from service? *1865, near Augusta Ga., discharged at Augusta Ga. 1866*
14. Were you with the command when it surrendered? *Yes*
15. Was *Theresa Loke* the husband of applicant present? *Yes*
16. If not present, where was he? *Present*
17. When and where did he leave his Command? *Never left*
- For what cause? *War ended*
- By whose authority he left? *The war ended in a general surrender*
- How do you know all this? (State fully and clearly.) *For well known here*

18. When and where did *Theresa Loke* die? *Some time in 1889, Augusta Ga.*
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? *Augusta Ga. All his life a Georgian from birth*
20. Do you of your own knowledge know that applicant is the lawful widow of *Theresa Loke*? *I do*
21. Has she remained unmarried since her soldier husband's death, and is now his widow? *Yes*
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? *Has none*
23. What property, effects or income did applicant possess in 1889 and 1900 and what disposition did she make of it? *Had none - to release*
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? *She had none to convey*
25. What is applicant's physical condition and her chances and ability to earn a support? *Can work only occasionally in cotton &c.*

26. Is applicant able to earn a support at labor of any sort, if not why? *No. She never did do any other kind of work but factory.*
27. How was she supported for 1889 and 1900? *Mostly by charity*
28. How much did applicant contribute to her support for last two years? *Very little.*
29. Give a full and complete statement of applicant's physical condition? *Very feeble & old.*
30. What interest have you in the recovery of this pension by the applicant? *None.*

Sworn to and subscribed before me this *14th* day of *March*, 190*1*.
John R. Wilkinson Ordinary.
Fulton County.
J. O. King & *R. H. Mullidge* Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

Fulton County.

Personally before me come *J. W. Hadson* and *Dr. C. Hadson* both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. *Theresa Loke* applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this *not good, but very poor, she is a weak old woman, has a heart trouble and is now in a hospital in waiting for a heart operation.*

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this *14th* day of *March*, 190*1*.
John R. Wilkinson Ordinary.
Fulton County.
V. M. Hadson & *J. C. Hadson* Witnesses.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, *John R. Wilkinson* Ordinary in and for said county, hereby certify that the applicant, Mrs. *Theresa Loke* resides in said county, and has been a bona fide resident of this State since *Birth* day of *1844*, and that the witnesses, Mr. *R. H. Mullidge* & *J. O. King* are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of *Fulton* county shows that applicant returned for taxation in her own name in 1889 *0* dollars worth of property, and in 1900 *0* dollars worth of property.

Witness my hand and official seal this *13th* day of *April*, 190*1*.
John R. Wilkinson Ordinary.
Fulton County.

NOTES.—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
 2. Additional affidavits may be attached, if blank spaces are insufficient.
 3. All affidavits must be made before Ordinary.
 4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 24th April, 1865, not entitled.
 5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, Abbie Lohrey, hereby authorize
H. Blocher of Atlanta Ga Fulton Co
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Covington Ga

In Witness Whereof, I have hereunto set my hand and seal, this 15th
day of Jan 1902

Executed in presence of

Abbie Lohrey [L. S.]
mark

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 the presence of

To Those Heretofore Paid

1902.

No. 127

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1902

PAID TO

Mrs Abbie Lohrey
Fulton County.

Widow of Thomas Lohrey
Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO

Abbie Lohrey
772 York
Geo. W. Lindsey [L. S.]

To Those Heretofore Paid.

1903.

No. 10

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs Abbie Lohrey
of

County,

Widow of Thomas
Co. 4th Ga. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO

Abbie Lohrey
127
Chal
Geo. W. Lindsey [L. S.]

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of **Fulton**.

PERSONALLY COMES Mrs.

*Abbie Loney***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 *with* That she is the Widow of

Thomas Loney who was a soldier in Company
of the *3rd* Regiment of *Ca*

Volunteers, that he enlisted in said regiment on or about the month of *April*
1861 and served in the Army up to *March* 1865 That he died
on the *Spring* of *1865*

equal poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1861

Deponent has been allowed an Indigent pension as a resident of **Fulton**
County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the
year ending December 31, 1902

Sworn to and subscribed before me, *Mrs Abbie Loney*
this *14* day of *Jan*, 1902
Ordinary Post Office

State of Georgia,

FultonI, *John R. Wilkinson*,

Ordinary of said County, certify that I am well
acquainted with Mrs. *Abbie Loney* 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 *31* day of *JAN* 1902

Official Seal of *John R. Wilkinson* Ordinary of **Fulton** County.

NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of **Fulton**.

PERSONALLY COMES Mrs.

Abbie Loney

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 *with* That she is the Widow of

Thomas Loney who was a soldier in Company
of the *3rd* Regiment of *Ca*

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

1861, and served in the Army up to *March* 1865 That he died

on the *Spring* day of *1865*

U.S.P.

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 1861

I have been allowed an Indigent pension as a resident of
County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the
year ending December 31, 1902

Sworn to and subscribed before me, *Abbie Loney*
this *14* day of *JAN*, 1903
Ordinary Post Office

State of Georgia,

County,

I, *John R. Wilkinson*,

Ordinary of said County, certify that I am well
acquainted with Mrs. *Abbie Loney* 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 *31* day of *JAN*, 1903

Official Seal.

John R. Wilkinson
Ordinary of **Fulton** County

NOTE.—All blanks must be filled.
Vouchers and affidavits 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 _____

Lakey Willie
TO THOSE HERETOFORE PAID,

1904.

No. *38*

**INDIGENT
WIDOW'S PENSION**

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. Willie Lakey

or

Fulton.

County.

Widow of *Thomas*

Co. *B 3rd Regt.*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/2 2

AND HANDLED TO

W

JOHN W. LINDSEY, State Printer, Atlanta.

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 _____

Lakey Willie
TO THOSE HERETOFORE PAID,

1905.

No. *844*

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1905.

PAID TO

Mrs. Willie Lakey

OF

Fulton.

County.

Widow of *Thomas Lakey*

Co. *B 3rd Regt.*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

2 1/2

AND HANDLED TO

W

JOHN W. LINDSEY, State Printer, Atlanta.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1.

STATE OF GEORGIA,
County of **Fulton**.

PERSONALLY COMES MRS.

Abbie Lokey

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*. That she is the Widow of *Thos. Lokey* who was a soldier in Company *B* of the *3rd* Regiment of *Inf.* Volunteers, that he enlisted in said regiment on or about the month of *Sept.* 1861, and served in the Army up to *Apr.* 1865. That he died on the *spring of* day of *Apr.* 18 *89*.

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 *61*.

I have been allowed an Indigent pension as a resident of **Fulton**, County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,
this *22* day of *JAN* 1904.

Post Office *Marion*

Ordinary.

State of Georgia,

Fulton, County.

I, *John R. W. Wicks*,

Ordinary of said County, certify that I am well

acquainted with Mrs. *Abbie Lokey* 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 *Birth* 18 *61*.

Given under my official signature and seal, this the *22* day of *JAN* 1904.

John R. W. Wicks

Ordinary of

Fulton, County

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,
County of **Fulton**.

PERSONALLY COMES MRS.

Abbie Lokey

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 *all her life*. That she is the Widow of *Thomas Lokey* who was a soldier in Company *B* of the *3rd* Regiment of *Georgia* Volunteers, that he enlisted in said regiment on or about the month of *Sept.* 1861, and served in the Army up to *Close Har* 1865. That he died on the *spring of* day of *Apr.* 18 *89*.

Infirmity and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 *61*.

I have been allowed an Indigent pension as a resident of **Fulton**, County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me,
this *22* day of *JAN* 1905.

Post Office *Marion*

Ordinary.

State of Georgia,
Fulton, County.

I, *John R. W. Wicks*,

Ordinary of said County, certify that I am well acquainted with Mrs. *Abbie Lokey* who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *all her life* 18 *61*.

Given under my official signature and seal, this the *22* day of *JAN* 1905.

Official Seal.

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.

Know all Men by these Presents, That I
County, State of Georgia, do hereby appoint

my true and lawful attorney in fact for
this and in my name, to receive and receive 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 receive in my name for said money 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.

Executed in the presence of us:
[C.S.]

Sent money to me as follows, by
[C.S.]

to
County, Georgia.
P. O.

Lomenack, J. D.
Hutton Co.
1893.

(Hiram Baldwin, Jr.)
No. 19
Application for Allowance

For the Year Ending October 31, 1893.

FOR

Disabled Arm
Applicant, *J. D. Lomenack*
County, *Hutton Co.*
Amount, *50*
Date of Warrant, *3/10*
Entered on record, *3/10*
MMA 1893.
Secretary Executive Department.

WARRANT HANDED TO

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Gulton County, }

PERSONALLY appears E. C. Samuels of Gulton 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 1845; 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 6 of 6th Regiment of Georgia Volunteers, Proctor's Brigade; that whilst engaged in such military service at the battle of the Wilderness in the State of Va, on the 1st day of May, 1863, he was wounded as follows: being shot wound in the left hand, losing the entire use of same.

1
0
0
0

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 1892.

Sworn to and subscribed before me, this, the 13th day of March, 1893.

W. L. L. Adams Ordinary

W. L. L. Adams 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, }

Gulton County, }

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

do certify that I am well acquainted with E. C. Samuels 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 Justice of the Peace 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.

W. L. L. Adams Ordinary

W. L. L. Adams Ordinary Gulton County.

STATE OF GEORGIA, }

Gulton County, }

W. L. L. Adams Ordinary

W. L. L. Adams Ordinary

Comp. No. 22-7402
Lower, John W.
Fulton Co.

INDIGENT PENSION,

~~1900~~

1902

Name John W. Lower

County Fulton
Co. C. 1st Ala. State Troop

Approved 1902 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. Harrison, State Prisoner, Alabola.

9/4-1902 4/10-1902

Pension Office - 8-27-1901.

Applicant is not an aged, infirmity is not clear that he can not earn a support and the terms of service are relied on most state date of enlistment and discharge, and when furlough was granted, for how long, for what cause, and why he did not return to the command. Prove all this to be true by a wit now.

J. W. Lindsey,
Com. of Pensions

Amended
era app.

STATE OF GEORGIA,

Power of Attorney.

County, }

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

Witness my hand and seal, this

day of _____ 1901.

Executed in presence of

[L. S.]

Power of Attorney.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____ Witness my hand and seal, this _____ day of _____ 1900. [L. 8.]

Executed in presence of _____

Pension Office - 8-27-1901.

Applicant is not an aged, infirmity is not clear that he can not earn a support when the rate of service are called on must state date of enlistment and discharge, for when discharge was granted, for how long he was in the service, and why he did not return to the service. Prove all this to be true by a writ now.

J. W. Lindsey,
Com. of Pensions

Amended -
664 up to

INDIGENT PENSION,

1900
1902

Name John W. Lower

County Fulton

Approved by J. W. Lindsey

1900

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HAND TO

9/14-1901 7/10-1902

Questions for Applicant.

STATE OF GEORGIA,

County. }

I, John W. Lower of said State and County, desiring to avail myself of the Pension Act (Section 1264, Code), hereby submit his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office) John W. Lower, Woodstock, P.O., Fulton County, Ga.
2. How long and since when have you been a resident of this State? Fifty five years 1845
3. When and where were you born? Woodville, St. C. March 22, 1845
4. When and where and in what company and regiment did you enlist or serve? First Georgia State Troops, March 1864
5. How long did you remain in such company and regiment? Fifteen months
6. When and where was your company and regiment surrendered and discharged? Columbus Ga. April 1865
7. Were you present with your company and regiment when it was surrendered? No
8. If not present, state specifically and clearly where you were, when you left your company, for what cause and by whose authority? It was my term, and I had a furlough for 30 days from my company
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? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity 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 Catarrh of lungs & throat & the lungs are a painful paralysis of left side, 1895 left arm is almost useless to me.
13. What property, real or personal, or income, do you possess, and its gross value? None
14. What property, real or personal, did you possess in 1864, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? I have received a part of the Corps' money
15. In what County did you reside during those years, and what property did you then return for taxation? I was a part of the time in Milton County & part in Fulton
16. How were you supported during the years 1898 and 1899? My brother helped me
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I helped a little & could
18. What was your employment during 1898 and 1899? What pay did you receive in each year? I have been a farmer but little for my labor
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have no family since my wife died & my children are all grown & left 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 not
22. How many applications have you ever made and under what class?

Sworn to and subscribed before me this the

14 day of Sept 1901.

John W. Lindsey, Ordinary,

of Fulton County.

Applicant,

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY)

Edw. Allgood of said State and County, having been presented as a witness in support of the application of *John W. Kerner* 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? *Edw. Allgood, Resident of Fulton County, Ga. Post Office, Chudale, Ga.*
2. Are you acquainted with *John W. Kerner*, the applicant; if so, how long have you known him? *All his life*
3. Where does he reside, and how long and since when has he been a resident of this State? *Fulton County, Ga. has resided in this State nearly a half century.*
4. When, where and in what company and regiment did he enlist, and how do you know? *He enlisted in No. 1st of Cavalry in Co. C. 1st Regt. State Troops.*
5. Were you a member of the same company and regiment? *Yes*
6. How long did he perform regular military duty? *About 18 months.*
7. When and where was his command surrendered? *Apr 1865, at Columbus, Ga.*
8. Were you present when it surrendered? *Was not present with Regt. at Columbus.*
9. Was applicant present? *He was at home on Burlington.*
10. If he was not present, where was he? *He was at home.*
When did he leave his command? *Apr 1865.* For what cause? *of Burlington.*
By what authority he left? *Officer in Command.* How do you know all of this? *as was in said Company's Regt. but some of the time on detail.*
11. What property, effects or income has the applicant? (Give your means of knowledge.) *None, having been squandered with his former condition.*
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, but I kept a book.*
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? *He has not.*
14. What is the applicant's occupation and physical condition? *Day laborer, his health seems to be poor.*
15. Is the applicant unable to support himself by labor of any sort, if so, why? *He cannot, on account of his infirmities.*
16. How was he supported during the years 1896 and 1898? *Do not know.*
17. What portion of his support for these two years was derived from his own labor or income? *Do not know.*
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? *See question 15 for answer to this question.*
19. What interest have you in the recovery of a pension by this applicant? *None.*

Sworn to and subscribed before me, this *11* day of *Sept*, 1904.
W. F. Seale Ordinary.

Ordinary's Office Fulton County, Georgia
I hereby certify that *Edw. Allgood* is a bona fide resident of said County and that his statements are entitled to full faith & credit he being a reputable man: *Sept-11 1904.*
Given under my hand & seal of Office *W. F. Seale* Ordry

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.)

Personally came before me, *W. F. Seale* and both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully *John W. Kerner*, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

He has Catarrh of head and throat and Stomach. Partial paralysis of left side. Cannot use left arm well. Has Dyspepsia also. All of which renders him unable to do hard work.

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

Sworn to and subscribed before me, this the

14 day of *Sept*, 1904.

John W. Kerner Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.)

I, *John W. Kerner*, Ordinary in and for said County, do hereby certify that the applicant *John W. Kerner* resides in said County and has been a bona fide resident of this State since the day of and that the witnesses, viz:

are of trustworthy character, and that their statements are entitled to full faith and credit. I further certify that before answering the foregoing questions the applicant and I read the oath herein prescribed, and that the full text of the affidavit was read to the applicant before same was signed.

I further certify that the tax digests of *Fulton* County, for the years 1896, 1897, 1898 and 1899, returned for taxation in his name in 1898 of property, and in 1899

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

Witness my hand and seal of office, this *14* day of *Sept*, 1904.

John W. Kerner 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 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.

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.

[L. S.]

Executed in presence of

CODE SECTION 154

(FOR THOSE ALREADY ENROLLED)

No.

121

INDIGENT

SOLDIER'S PENSION

1903.

Name

John W. Lowry

County

Fulton

Co.

1st

Regiment

1st

State Troop

WARRANT ISSUED

120

1903.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

App

JOHN W. LINDSEY, State Printer, Atlanta

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

1904.

[L. S.]

Executed in the presence of

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1904.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

App

JOHN W. LINDSEY, State Printer, Atlanta

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton.

County.

Personally appears Jim W Loner 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 22 day of March 1845; that he is 20 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 13 mos in Company C, of 1 th Regiment of 1st State Troops; that his physical condition is as follows: S & 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 16th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have resided 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 1904.

Ordinary.

STATE OF GEORGIA,

Fulton.

County.

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

Ordinary.

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears Jim W Loner of County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of March 1845; that he is years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 13 mos in Company C, of 1 th Regiment of 1st State Troops; 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 16th, 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.

Ordinary.

STATE OF GEORGIA,

Fulton.

County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with Jim W Loner the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 JAN 20 1904.

Ordinary.

Fulton.

County.

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

State of Georgia; Personally come
Fulton County J. H. Loner of said
State and County who being duly sworn
in relation to his own application for
Pension, deposes and says as follows.
Enlisted in March 1864. Company C.
1st Ga State Troops at Marietta Ga &
Served in said Company & Regt. Continuously
from date of enlistment March 1864 up
to about 27th ~~March~~ 1865. when I was granted
a legal furlough for 30 days.
and on said furlough I came home.
and before my furlough had expired
my Company & Regiment was captured
at Columbus Ga and I had no where
and no Command to report to, and
further more the General Surrender of the
Confederate Armies, had been declared
before my furlough was fully out.
and about the 1st of May 1865. I went
to Atlanta Ga and surrendering to the
Federal forces, and receiving my Parole.
at same time during my term of
Service near Thirteen Months in Co. C.
1st Ga State Troops I performed my duty to
the best of my ability, ~~and~~ was always
ready for any hardship when called on
and during the time did not receive
but the once furlough, & then the
Officers said I was entitled to it as
matter of right, and at this time

Georgia Personally come John
Millon County J. H. Jones of said State
and County who being duly sworn
in relation to Application of J. H. Loner
for Pension Says as follows. I was a
Soldier in Confederate Army, having gone
from Millon County and joined J. H. Loner
well before the War, our homes were
near each other, and on March the
27th 1865. I reached my home on furlough,
and J. H. Loner reaching his home same
day. I saw and read his furlough, it
was dated I think March 26-1865 &
was given for 30 days. I am satisfied
it was genuine and all right and
before this furlough had expired the
War was over. I know of my own
personal knowledge that he did not
desert his Command, and his
absence at the time of the Surrender
of his Company and Regiment, is fully
accounted for as above stated.
~~After~~ it was ascertained that the Armies
of the Confederacy had Surrendered
said J. H. Loner went to Atlanta Ga
and was Paroled &c, said J. H. Loner
is destitute of any property or income
and is Physically broke down.
Sworn to and subscribed J. H. Jones
before me Sept 11th 1902
H. D. Seace Clerk over

I do not know of any ^{person} member of
my Company, ^{by whom} I can prove
the contents of my furlough, but it
was legally issued at time I have
stated, and it read for 30 days. &
as things turned ^{out} as they did I could
not get to command any more.
In regard to my Physically ability, I am
wholly unable to earn a support by
manual labor. I suffer ^{much} Calarrh of
the Head, Throat and Stomach, and
Partial Paralysis of left side and arm.
at times my left arm is practically
useless all of which render me un-
able to earn a support, and have
no property, or income out of which
to get a support, and have no
relatives who are able to assist me.
I come to and subscribe
before me 13 Sept 1907 J. W. Lower
John W. Lower
Comman

Georgia J. H. D. Seale Ordinary
Milledgeville, Ga and for said County
hereby Certify that John W. Jones is a
Bond fide Citizen and resident of this
County, he is of good Character and his
Statements as to truth & veracity are
worthy of full faith and Credit
Given under my hand and seal of Office
This 13th Sept 11th 1907. H. D. Seale Ordry
Milledgeville, Ga

NAME **Loner, J. W.**
John

YEAR 1908 COUNTY **Fulton**

WHEN AND WHERE BORN? **March 22, 1846 - Abbeyville, South Carolina**
Resident of Georgia since 1866.

ENLISTED WHEN AND WHERE? **March 1864 - Marietta, Georgia.**

RANK.

COMPANY AND REGIMENT? **Company C, 1st Ga State Troops**

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? **March 27, 1865 given**
furlough home for 30 days, and before furlough had expired command had
been captured, hence, no command to report to, and about May 1, 1865
received parole at Atlanta, Georgia.

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. **G. W. Allgood - same command -- No data.**
J. W. Jones - by personal knowledge -- No data.
1w

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Fulton COUNTY }

I, W. H. Huggins Ordinary of said County, do certify that I know Mrs. Hattie C. Long 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 10 day of Oct 1919

That I also know Wm. F. Long whom as to marriage, and as to her name

before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 10 day of Oct 1919
(SEAL.) W. H. Huggins Ordinary.
County.

NOTES: 1. Before any questions are answered the Ordinary shall answer 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 witness."
- "I solemnly swear that I will true answers make to each of the questions asked me and the witness."
- "Additional affidavits may be attached if both spouses are indigent."
- "Only witnesses who served prior to first January 1864, are competent."
- "Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation."
- "Witness of Doubtful Pensioners must use the above Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so."

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—As Amended by Act of 1919.

County Fulton
Name Mrs. Hattie C. Long
Widow of Wm. F. Long
Company 4 March 1904
Regiment 5th Fla
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-23-1919

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY }

I, T. H. Jeffery Ordinary of said County, do certify that I know Mrs. Hattie C. Long 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 10 day of Oct 1919

That I also know Wagner & Russell witness as to marriage, and I also know

that both of the foregoing were duly sworn by me clerk before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 10 day of Oct 1919

(SEAL) T. H. Jeffery Ordinary.
Wagner 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 of the county of residence.
4. Only widows who married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

Ok for (M) 1919
Long & other B.
Ref. Fulton Co.

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, 1918—As Amended by Act of 1919.

County Fulton
Name Mrs. Hattie C. Long
Widow of Thos. F. Long
Company 4
Regiment 5th Fla
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Burd Printing Co. State Printer, Atlanta.

10-23-1919

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Wm. H. A. B. Lang of said County, who, after being duly sworn, says that she is the widow of Theodore F. Lang to whom, in the County of Bulloch State of Ga she was married on the 10 day of Oct 1871, and that she remained his wife, and resided with him to the date of his death in March 1904 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$6.00 in Darrell County for 10.00 per annum, on account of being a soldier in Company Ga Regiment 5th Fla (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of Fulton and she has continuously resided since Oct 1904 under the state

Sworn to and subscribed before me, this the

20 day of Oct 1919

Arthur B. Moulton Ordinary

of Fulton County.

(SEAL)

Wm. H. A. B. Lang
Wm.

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

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. Maggie B. Moulton known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Hattie B. Lang who made the foregoing affidavit, is the lawful widow of Theodore F. Lang who died in Fulton County in said State of Ga on March 1904 and that she has not since remarried. That she became the wife of Theodore F. Lang on the 10 day of Oct 1871, and that she and he had resided together as man and wife continuously since 10 day of Oct 1871 and that the date of his death was the same man who was on the pension roll of said State from Darrell County he when he died.

Sworn to and subscribed before me, this the

20 day of Oct 1919

Arthur B. Moulton Ordinary

of Fulton County.

(SEAL)

Mrs. Maggie B. Moulton

of their own personal knowledge Mrs. Hattie C. Lang, who made the foregoing affidavit, is the lawful widow of Theodore F. Lang who died in Fulton County in said State of La on March day of 1904 and that she has not since remarried. That she became the wife of Theodore F. Lang on the 10 day of Oct 1871, and that she and he had resided together as man and wife continuously since 10 day of Oct 1871 to the date of his death and that the he was the same man who was on the pension roll of said State from Dec 1866 County La when he died.

Sworn to and subscribed before me, this the

10 day of Oct 1904
William B. Mendenhall Ordinary
of Fulton County.

(MHAL)

Miss Maggie Thilwell

approved (H)
 Long, Duke Hamilton
 Hamilton Co.
 Widow's Application

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

County Fulton
 Name Mary Hamilton Long
 Widow of Henry Clay Long
 Date of Marriage Dec 17 1878
 Company 1st Ark. Heavy Arty. Cont.
 Regiment 1st Ark. Heavy Arty. Cont.
 Approved John W. Clark
Dec 27 1927

Go to Gen. "4-07"
 sent for W.P. "4-07"

JOHN W. CLARK,
 Commissioner of Pensions.

9-22-27

STATE OF GEORGIA.

Fulton COUNTY.

Ordinary's Certificate.

I, Wm H. Jeffries Ordinary of said County, do certify
 that I know Mary Hamilton Long 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 1878 that I also know Wm R. Daugherty
 a witness Long, Duke Hamilton of statement; that both of them are now residents of said County and
 were duly sworn 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 office this 19th day of Dec 1927

Wm H. Jeffries Ordinary.
 d 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 witness."
- Additional affidavits may be attached if bona fides are insufficient.
- Only widows who married prior to January 1st, 1881, are entitled to pension.
- The applicant must be a resident of this State at the time of her death, and the applicant or witness resident and must be certified by such Ordinary.
- The applicant must prove marriage by some person, or by general reputation.
- Fill out in the back of the application carefully.
- Be sure to fill in every blank space in the application in proper order throughout the State. A short, simple form is easier to handle.

Approved (4)
Long, Lucy Hamilton
Hulton Co.
Widow's Application

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

County
Name
Date of Marriage
Company
Regiment
Approved
John W. Clark
Commissioner of Pensions

Ordinary's Certificate.

STATE OF GEORGIA.

Fulton COUNTY.

I, Wm. R. Dashiell Ordinary of said County, do certify that I know Lucy Hamilton Long 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 Jan. 1st, 1920; that I also know Wm. R. Dashiell the witness who ~~was~~ was the service of husband; that both of them are now residents of said County and were duly sworn to 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 Sept 1927.
(SEAL OF ORDINARY) Wm. R. Dashiell 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, 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, Lucy Hamilton Long 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) Lucy Hamilton Long
190 Peachtree Hills Ave. Fulton County.
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? Have resided continuously in Fulton County Georgia since February, 1924
- When, where and to whom were you married? was married in 1875 at Waverly, Mississippi, to Henry Clay Long
- 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.) Henry Clay Long enlisted in 1861, at Memphis, Tenn., in the 1st Regt. of Miss. Inf. Co. 1st Div. 1st Corps. He was killed at Vicksburg, Miss. in 1863.
- When and where did the command of your husband surrender or discharge from the service? at Vicksburg, Miss. in 1863. That part of his history is lost.
- 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?
- a. For what cause did he leave? He was discharged at the surrender
- b. By whose authority did he leave?
- c. For how long was his leave of absence granted? In what way?
- e. What was his physical condition when he left his command? Good
- f. What effort did he make to return to his Command?
- g. In what way was he prevented from going back to Command?
- h. Was he captured by the enemy at any time? No
- i. If so, when and where? In what prison was he held and when was he released?
- j. When and where did your first husband die? Feb 11, 1866 at 806 Jefferson St. Memphis Tenn.
- 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
- n. Have you or your husband heretofore been paid a pension by the State? Yes: to the undersigned
- o. When and for what cause were you or your husband placed on the roll? In 1920, while I was residing in Memphis, Tenn., by the State of Tennessee as the widow of Henry C. Long.

Sworn to and subscribed before me, this the 10 day of Sept 1927

William R. Dashiell Ordinary of Fulton County.

(SEAL OF ORDINARY)

Lucy Hamilton Long Applicant.

Questions for Witness as to Service of Husband and Marriage

STATE OF GEORGIA.

Hulton COUNTY.

Wm. R. Dashiell, of said State and County is hereby presented as a witness in support of the application of Mrs. Lucy H. Long for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? Wm. R. Dashiell, Route 6 Box 50, Atlanta, Ga.
2. How long and since when have you known Mrs. Lucy Hamilton Long applicant for thirty eight years, since 1889.
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? 130 Peachtree Hills Ave., Dorton, Ga., since February 1924
4. When and to whom was she married? 1875 to Henry C. Long How do you know? Bible record
5. How long and since when did you know Henry C. Long her husband? Since 1889.
6. When and where did Henry C. Long the husband of applicant, die? February 11, 1914, at Memphis, Tenn.
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? None
9. Were they divorced? No.
10. When, where and in what Company and Regiment did Henry C. Long enlist? 1861, Memphis Tennessee, in the Signal Corps, Regular Army
11. How did you obtain your information of this service? From Washington ordinary postcard
12. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) From June 1861, to June 1862.
13. When and where was his Command surrendered or discharged? (Give date and place.) Not known
14. Were you personally present with this Command when it was surrendered? No.
15. If not, where were you in Virginia and how came you there? I never served with Mr. Henry Long
16. Was the husband of applicant personally present with his Command at its surrender? Yes.
17. If not where was he? and how came him there?
18. When, where and for what cause did he leave his Command? (Give date.) Never left his command
19. By whose authority did he leave his Command?
20. 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) From the newspapers at the time of his death also from conversations with him while he was living

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?
18. In what prison was he held? None and when released?

Sworn to and subscribed before me, this the 10 day of Sept, 1924

Wm. R. Dashiell,
(Witness)

William R. Dashiell, Ordinary
of Hulton County.
(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? *None* and when released?

Sworn to and subscribed before me, this the *10* day of *Sept.*, 192*4*

William R. Wescott Ordinary
of *Fulton* County.
(SEAL OF ORDINARY)

Wm. R. Dashiell
(Witness)

(copy)
War Department,
The Adjutant General's Office
Washington, Nov. 10, 1927

The name Henry Clay Long has not been found on the rolls on file in this office of any Tenn. C.S.A. organization.

The records show that H. C. Long (not borne as Henry Clay Long), private, Co. C, 1st (Colquitt's), Ark. inf., C.S.A. enlisted Feb. 13, 1864 and on muster roll for July 1 to Aug. 31, 1864 (last on file) is shown present.

The records show that under Special Order #122, Hdqrs. Army of Tenn., Nov. 18, 1864, he was detailed for duty with Signal Corps.

His name appears on a muster roll of the Signal Corps, Army of Tenn., paroled Greensboro, N.C., Apr. 26, 1865.

(signed) Lutz Wahl,
Major General,
The Adjutant General.

ROBT. C. CROUCH, PRESIDENT
W. W. COURTHNEY, SPECIAL EXAMINER
M. V. CRUMP, MEMPHIS
JNO. P. HICKMAN, SECRETARY

HON. FRANK B. HALL, CHAIRMAN
HON. JOHN TROTWOOD MOORE, LIBRARIAN
HON. EDGAR J. ORAHAM, COMPTROLLER
HON. ERNEST H. HASTON, SECTY. OF STATE

HEADQUARTERS

Tennessee Board of Pension Examiners

BOARD MEETS SECOND TUESDAY IN JANUARY
APRIL, JULY AND SEPTEMBER

Nashville, Tenn.

Dec 1 27

Lucy H. Song

A pensioner of Tenn

Widow of H. C. Song

A member of The Signal Corps -

Army of Tenn

Mar Records report:

"Transferred from Lucius E. Dole's Brigade,

To The Signal Corps of the Army of Tenn"

The last Confederate Soldier of Memphis, Tenn, fully endorse his record, as a Confederate Soldier.

We have him on our roll, as a member of The Signal Corps.

Respectly

Jno. P. Hickman

State of Mississippi,
Lowndes County.

AFFIDAVIT

Personally appeared before me, Robin Weaver, a
Notary Public in and for the said State of Mississippi,
Lowndes County thereof, Mrs. Wattie Young Hopkins,
Mrs. Lucy Young Stockard, and Mrs. Woodie Betts, each
being personally known to me, all resident citizens of
the City of Columbus, Lowndes County, Mississippi, and
each being by me first duly sworn, each says on oath that:

1. Affiants were all present at the wedding of
Lucy Hamilton to Henry Clay Long, and that said wedding
was solemnized in Lowndes County, Mississippi on the
12th day of December, A. D. 1874;
2. Affiants were personally acquainted with the said
Lucy Hamilton and Henry Clay Long;
3. Affiants personally know that the said Lucy
Hamilton Long is now a resident citizen of 130 Peachtree
Hills Avenue, Atlanta, Georgia;

Mrs. Wattie Young Hopkins
Mrs. Lucy Young Stockard
Mrs. Woodie Betts

Sworn to and subscribed before me this 3rd day of
November, A. D. 1927. My commission expires Oct. 27, 1930.

Robin Weaver
NOTARY PUBLIC

ROBT. C. CROUCH, PRESIDENT
W. W. COURTESY, SPECIAL EXAMINER
M. V. CRUMP, MEMPHIS
JNO. P. HICKMAN, SECRETARY

HON. FRANK S. HALL, CHAIRMAN
HON. JOHN TROTWOOD MOORE, LIBRARIAN
HON. EDGAR J. ORAMAM, COMPTROLLER
HON. ERNEST H. HASTON, CLERK OF STATE

HEADQUARTERS

Tennessee Board of Pension Examiners

BOARD MEETS SECOND TUESDAY IN JANUARY
APRIL, JULY AND OCTOBER

Nashville, Tenn. Nov 4

To Whom it may concern.
This is to certify that Mrs. Lucy Hamilton Long
was a pensioner under the Tennessee State Law
By reason of her husband's service in the Confederate
Army. He first enlisted in Co "C" 1st Arkansas Regi.
but was transferred to the Signal Corps of the
Army, with which he served until the surrender
of Gen. Lee at Appomattox in North Carolina. April 27, 1865

Yours truly
W. W. Courtesy
Special Examiner

Nashville, Tenn., Nov. 4, 1927.

To Whom it may concern:

This is to certify that Mrs. Henry C. Long was on the
Confederate pension rolls of the State of Tennessee in the year 1923 and for
several years previous to that date. She was dropped from the rolls solely be-
cause of having moved to another State.

Board of Pension Examiners
Jno. P. Hickman
Secretary

Sworn to and subscribed before me this 3rd day of

November, A. D. 1927. My commission expires Oct. 27, 1930.

Robin Weaver
NOTARY PUBLIC

Board of Pension Examiners
Dr. J. H. H. H. H. H.
Secretary

West Point, Miss.

September 1927.

Personally appeared Mrs. H. C. Terrell who makes affidavit that she was present at the marriage of Lucy Hamilton to Henry Clay Long and that said marriage occurred in Waverley, Mississippi on December the 17th, 1875 and that the said Lucy Hamilton Long and Henry Clay Long were living together as husband and wife at the time of his death on February 11th, 1916, that she has not since his death re-married and is now his dependent widow.

Mrs. H. C. Terrell

Sworn to and subscribed before me,
this 17th day of September, 1927.

A. B. Kettrell

Notary Public

my commission
expires Apr. 24, 1931

State of Mississippi,

Lowndes County.

AFFIDAVIT

Personally appeared before me, Robin Weaver,
a Notary Public in and for the aforesaid State and County,
William Baldwin, Cicero L. Lincoln, and Thomas B. Franklin,
each personally known to me, all resident citizens of
Lowndes County, Mississippi, and each being by me first
duly sworn, says on oath that:

1. Affiants personally knew and were acquainted
with Henry Clay Long in his lifetime, and personally
know that the said Henry Clay Long served in the
Confederate Army during the Civil War and personally
know that the said Henry Clay Long is now dead.

Wm Baldwin

Cicero L. Lincoln

Thos B Franklin

Sworn to and subscribed before me this 3 day of

November A. D. 1927. My commission expires Oct. 27, 1930.

Robin Weaver

Notary Public

November A. D. 1927. My commission expires Oct. 27, 1930.

Robin Weaver

Notary Public

November 4, 1927.

His Excellency the Governor of Tennessee,
Nashville, Tenn.

Dear Sir:

Mrs. Lucy Hamilton Long has made application for a pension in Georgia as the widow of Henry Clay Long, and states that she was placed on the pension roll of Tennessee in 1880.

Will you not have your Department of Confederate Pensions furnish a copy of the record of Henry Clay Long as it appears on the application of his widow, Lucy Hamilton Long. I am very anxious to receive this information promptly in order that Mrs. Long's application may be given proper and prompt consideration.

With many thanks for your attention to this request and with kind regards,

Very truly yours,

Commissioner of Pensions

A

October 13, 1927.

Hon. Thom. H. Jeffries,
Ordinary of Fulton County,
Atlanta, Ga.

My dear Judge:

I have under consideration the application of Mrs. Lucy H. Long for a pension as the widow of Henry Clay Long. The witness to this application did not serve with H. C. Long and is only able to give hearsay evidence.

Please have Mrs. Long furnish a copy of her application as approved by the State of Tennessee, or furnish some direct evidence as to her husband's service.

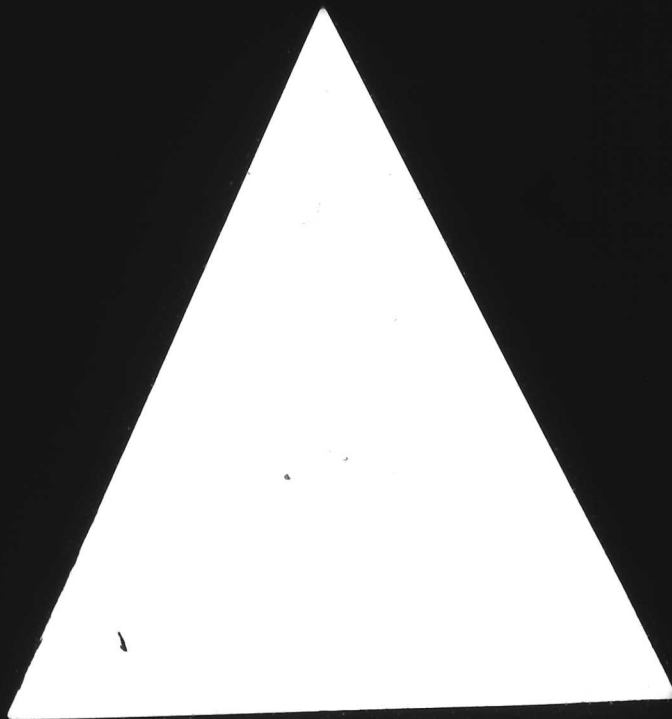
As soon as such evidence is received, Mrs. Long's application will receive further careful consideration.

With kind regards,

Very truly yours,

Commissioner of Pensions

A



Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.

I, Thos. D. Jeffries

know Marion E. Long

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

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

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

that I know Marion E. Long

the applicant for pension. She

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

(SEAL) Fulton County.

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

2. Only persons who were married prior to January 1st, 1891, are entitled to pension. The Ordinary shall certify to the fact of the person to be sworn and certified by

3. The Ordinary shall certify to the fact of the person to be sworn and certified by

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton

Name Marion E. Long

Widow of David C. Long

Company 16

Regiment 2nd S.C. Cav.

Approved John T. C. Wick

Commissioner of Pensions

11-16-22

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Mc LONG, Marion E.
New Class
Fulton County
"NEW" CLASS

10/28/22

Ordinary's Certificate

STATE OF GEORGIA,

Tulston COUNTY.

I, Thos B Jeffries Ordinary of said County, do certify that I know Maria E Long 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 John W David the witness who swears to the correctness of her statement; that both of them are now residents of said County and were duly sworn to 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 15 day of Sept 1922
(SEAL) Thos B Jeffries Ordinary,
Tulston 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, 1900, 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,

Tulston COUNTY.

Personally before me comes Maria E Long 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? Maria E Long, Tulston Co
2. How long and since when have you been a continuing resident of the State of Georgia? 27 years Tulston Georgia 1894
3. When, where and to whom were you married? David O Long, at Bristol S.C. from 1894
- 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.) Company 2nd S.C. Cavalry known as 2nd S.C. Troop 1862
5. When and where did the commands of your husband surrender or discharge from the army? Greenville 1865 in S.C.
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes
7. If he was not present state clearly where he was?
8. Where was his command when he left?
- a. For what cause did he leave his command?
- b. By whose authority did he leave his command?
- c. For how long was he granted leave of absence?
- e. What was his physical condition when he left his command?
- f. What effort did he make to return to his command?
- g. In what way was he prevented from going back to Command
- h. Was he captured by the enemy at any time? 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? Atlanta Ga Sept 15th 1922
- 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

21 day of Feb 1922
John W David Ordinary
of Tulston County.
(SEAL)

Mrs Maria E Long

LONG, Maria E.
Widow of David O Long
NEW CLASS
WIDOW'S PENSION

Widow's Pension

Under Act 1910 as Amended by Act of 1919.

County Tulston

Name Maria E Long

Widow of David O Long

Company 15

Approved John W David

Commissioner of Pensions

11-16-22

J. W. LAMBERT,

Commissioner of Pensions.

State Printing Co. State Printing House.

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA, State of South Carolina

Greenville COUNTY.

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

1. What is your name and where do you reside? A. Blaythe, Greenville S.C.
2. How long and since when have you known applicant?
3. How long and since when has she continuously resided in this State? (Give date.)
4. When and to whom was she married? David O. Long How do you know?
5. How long and since when did you know David O. Long her husband? found my flight in Oct. or Nov. 1863
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 D. O. Long enlist? 2nd S.C. Cavalry, Co. H. about Nov. 1863
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 the end of the Confederate War
12. When and where did his Command surrender, and was discharged? At Appomattox River, S.C. about day after April 1865
13. Were you personally present when it was surrendered? discharged If not, where were you Yes and how came you there?
14. Was the husband of applicant personally present at surrender? Direct evidence If not where was he? He was present When, where and for what cause did he leave Command? (Give date.) Before By whose authority did he leave his Command? By his own 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? He knew the position was lost
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

7th day of February, 1921,
Thos. C. Scott Ordinary
of Greenville County.
(SEAL) S.C.

A. Blaythe
Lieut. Co. H.
2nd S.C. Cavalry

STATE OF SOUTH CAROLINA.
COUNTY OF GREENVILLE.

Personally before the undersigned authority now
MISS LIDA LONG, who upon oath says:

That she knew David O. Long and knows Mrs. Maria
E. Long; that she was present at the marriage of the said David O. Long
and Miss Maria E. Clower, which took place at Greenville, S. C. on
June 5, 1878; that the said David O. Long and Maria E. Long lived to-
gether continuously as man and wife from the date of their marriage to
the date of the death of the said David O. Long on Sept. 15, 1902, in
Atlanta, Ga. That the said Maria E. Long has not remarried since the
death of her husband and is now his lawful widow.

Sworn to and subscribed before me
this February 13, 1922.

W. H. R. R.
Notary Public, Greenville, S. C.
Notary Public S.C.

Maria Lida Long

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
J. LEE McDAVID, who upon oath says:

That he was present at the marriage of David O. Long
and Mrs. Maria E. Long, which took place at Greenville, S. C., in the
Spring of 1878; that the said David O. Long and Maria E. Long lived
together continuously as man and wife from the date of their marriage
to the date of the death of the said David O. Long in the year 1902;
in Atlanta, Ga. That the said Maria E. Long has not remarried since
the death of her husband and is now his lawful widow.

Sworn to and subscribed before me
this February 25, 1922.

William R. Bryant
Notary Public

J. Lee McDavid

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
J. LEE McDAVID, who upon oath says:

That he was present at the marriage of David O. Long
and Mrs. Maria E. Long, which took place at Greenville, S. C., in the
Spring of 1878; that the said David O. Long and Maria E. Long lived
together continuously as man and wife from the date of their marriage
to the date of the death of the said David O. Long in the year 1902;
in Atlanta, Ga. That the said Maria E. Long has not remarried since
the death of her husband and is now his lawful widow.

Sworn to and subscribed before me
this February 25, 1922.

Arthur R. M. M. M. M. CCO

J. Lee McDavid

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY }

I, *T. H. Applegate* Ordinary of said County, do certify that I know Mrs. *Mary Long* 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 *7* day of *Oct* 19*19*

That I also know *J. T. Rapch* witness under oath, and I also know

that both 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.

Sworn under my hand and official seal of office this *19* day of *Oct* 19*19*
(SEAL.) *T. H. Applegate* Ordinary,
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 be the truth. So help you God." Sworn makes to each of the questions asked you and the evidence

2. Additional affidavits may be introduced if such person are insufficient.
3. All affidavits must be sworn to before the Ordinary.
4. Only widows who married prior to first January, 1861, are entitled.
5. Affidavits must be sworn to before the Ordinary.
6. Widows of deceased Pensioners must use the Blue Application Blank and state and prove full term of husband's service according to laws in proof of service and law not required to do so.

Widow's Application
7-22-1919
old No. 7-1919

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—As Amended by Act of 1919.

County *Fulton*
Name *Mrs. Mary Long*
Widow of *W. J. Long*
Company *A*
Regiment *27th Ga.*
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-31-1919

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

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes J. T. Roper known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Mary Long who made the foregoing affidavit, is the lawful widow of W. J. Long who died in Fulton County in said State of Ga on 27 day of July 1918 and that she has not since remarried. What she became the wife of on 18, and that she and he had resided together as man and wife continuously for over forty years before the death of W. J. Long was the same man who was on the pension roll of said State from Fulton County when he died.

Sworn to and subscribed before me, this the

27 day of Oct 1919

Arthur R. Martin Ordinary
of Fulton County.
(SEAL)

Jas. P. Roper

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY.

I, T. H. Gaffney Ordinary of said County, do certify that I know Mrs. Mary Long 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 27 day of Oct 1919

That I also know J. T. Roper witness as to marriage, and I also know

that both of the foregoing were duly sworn by me myself before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 27 day of Oct 1919

(SEAL) T. H. Gaffney 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 of the county of residence.
4. Only widows who married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

Mary Long
Oct 19 1919
Old No. 1000
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—
As Amended by Act of 1918.

County Fulton
Name Mrs. Mary Long
Widow of W. J. Long 7-22-1918
Company A
Regiment 27th G.S.
Approved _____

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

10-31-1919

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

.....Bilton..... COUNTY.

Personally before me comes Mrs. Mary Long of said County, who, after being duly sworn, says that she is the widow of W. J. Long to whom, in the County of Gwinnett State of Georgia she was married on the 16 day of April 18 65, and that she remained his wife, and resided with him to the date of his death in July 22, 1918 and that she has not since his death remarried. At the time of his death he was a resident of Dalton County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$80.00 in Dalton County for 1918 per annum, on account of being a soldier in Company "A", 27th Ga. Regiment of Inf. (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of Fulton and she
has so continuously resided since Oct. 1879 day of Nov

Sworn to and subscribed before me, this the

2 day of Oct 1919
Wm. H. Hoff Ordinary
 of Fulton County.
 (SEAL)

Mrs Mary Lang
46 W Mitchell

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

STATE OF GEORGIA,

Fulton..... COUNTY

Personally before me comes Wesley Edmonds known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Mary Long who made the foregoing affidavit, is the lawful widow of W. J. Long who died in Pulton County in said State of Georgia on 22 day of July 1918 and that she has not since remarried. ~~That she was never married~~ MS the deceased Mr. and that she and he had resided together as man and wife continuously for over forty years before the death of W J Long ~~since~~ MS and that the W J Long was the same man who was on the pension roll of said State from Pulton County when he died.

Sworn to and subscribed before me, this the 5

-----day of October-----19 19
----- Ordinary
of Dilton----- County.
(SEAL)

(SEAL)

[illegible]

24. 50
affidavit, is the lawful widow of W. J. Long who died in FAWSON
County in said State of Georgia on 22 day of July 1918,
and that she has not since remarried. ~~W. J. Long was the~~
the ~~deceased~~ Mr., and that she and he had resided together as man and
wife continuously ~~since~~ for over forty years before the death of W. J. Long and that the W. J. Long was
the same man who was on the pension roll of said State from Fulton
County when he died.

Sworn to and subscribed before me, this the

day of October 1919

Ordinary

of Fulton County.

(SEAL)

POWER OF ATTORNEY.

State of Georgia,
County, }

I, _____, hereby authorize _____

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

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

[L. S.]

Executed in presence of _____

Long, S. M. Mue
Fulton Co
For Those Heretofore Paid.

1899.

NO. *2570*
(From Pike Co. 1898)

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO
Mr. J. M. Long
OF
Fulton County
Widow of *John H. Long*

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/1 1899.
AND HANDLED TO
Appch

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

S. M. Long

who, being sworn, says on oath, that she is a bona fide resident of said county of Fulton Georgia, and that she has resided in said State continuously ever since 1846 That she is the Widow of

Capt. Wm. H. Long who was a soldier in Company D of the 1st Light Artillery Regiment of 5th Geo Volunteers, that he enlisted in said regiment on or about the month of May 1861 and served in the Army up to March 29th 1862 That he lost his

life on the 29th day of March 1862 (State here

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

Wm. Long died at Fayetteville Tennessee with Pneumonia
on March 29th 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1842

I have been allowed a pension as a resident of Pike 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

1 day of July 1899.

Post-Office

State of Georgia,
Fulton County.

I, M. M. Long
Ordinary of said County, certify that I am well acquainted

with Mrs. S. M. Long 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 1846 day of 1846

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

Official
Seal.

Ordinary of Fulton County.

Smithville, Ga.
15th May 1901

Ordinary Gulton county
Dear Sir please put the
name of Mrs J. M. Song
on your list as she is now
living in your county
Mrs J. M. Song drew her Pension
in this county for the year
1900 but is now living in
Gulton county and wishes
to draw her pension in your
county I have written to Mr
Lindsay about the matter and
Mr J. M. Song, I know Mrs
J. M. Song is the person
the secretary heret to be
by putting her name on
roll from Gulton county

Long (Mrs) J. M.
Gulton County
To the Honorable J. M. Song
15th May 1901

POWER OF ATTORNEY.

STATE OF GEORGIA,
Gulton County. }

I, Mrs. J. M. Song hereby authorize
Mrs. J. S. Taylor of Gulton, Gulton Co. Ga
to receive and receipt for the pension paid hereon and request that she remit same to
me at J. S. Brown & Co. Gulton, Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17th
day of May 1901.

J. M. Song [L. S.]

Executed in presence of
J. S. Brown & Co.
and G. B. Frazier

1901.
No. 294

WIDOW'S PENSION,
For year ending February 15th, 1901.
PAID TO
Mrs J. M. Song
Widow of J. M. Song
Gulton County,
Widow of J. M. Song
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
May 17th 1901,
AND HANDLED TO
J. S. Taylor
J. S. Taylor

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

COPIES OF
STATE OF GEORGIA
WIDOWS HERETOFORE ALLOWED PENSIONS

you will very much
 oblige your fellow
 ordinary of Lee county
 you said he Col Sinsay
 and show him this letter
 Mrs S M Song is living
 in Atlanta in 53 crew
 street
 I will appreciate it
 very much if you can
 let Mrs Song and Col
 Sinsay so that she can
 draw her Pension
 with highest regards
 Geo L. Edwards
 you can see
 both Col Sinsay and
 Mrs S M Song
 about this

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

S M Song

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 1846.

That she is the Widow of

Capt W H Sinsay

who was a soldier in Company

D of the 5th

Regiment of Georgia

Volunteers, that he enlisted in said regiment on or about the month of May (1861)

1861 and served in the Army up to Nov 27th 1862 That he lost his

life on the 29th day of March 1862. (State here

particulars of the husband's death, when, where and from what cause) He died

with Pneumonia at Lagawell

Tennessee Nov 6th 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1842.

I have been allowed a pension as a resident of Lee 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

17th day of May 1901.

John R Wilkinson Ordinary.

Post Office Atlanta Ga

State of Georgia,

Fulton

County.

Ordinary of said County, certify that I am well acquainted

with Mrs. S M Song, 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 23 day of Sept 1846

Given under my official signature and seal, this the 17th day of May 1901.

Official Seal.

John R Wilkinson

Ordinary of Fulton County.

John R. Wilson
Deputy Clerk
Fulton County
Georgia
Sept 23, 1901

John R. Wilson Ordinary. Post Office
State of Georgia, Fulton County. } Ordinary of said County, certify that I am well acquainted
with Mrs. M. S. Long, 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 23 day of Sept 1896
Given under my official signature and seal, this the 17 day of Jan 1901.
John R. Wilson
Official Seal. Ordinary of Fulton County.

Long, Thomas W.
Fulton Co.
Long, Thomas W.

No. 312

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCT. 31, 1911

Right Land Co.
Applicant

County

Amount

Date of Warrant

Entered on Record

July 1911

SECRETARY

Applicant

100-1111

Long, Thomas W.
Fulton Co.
George Washington

No. 312

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCT. 24, 1889.

FOR
Right Leg
Applicant: W. H. Long
County: Fulton
Amount: 50

Date of Warrant: Dec 9/89

Entered on Record:
Dec 9 1889
W. H. H.
SHERIFF

Applicant

LIGHT PRINT AND, OR BAD COPY

STATE OF GEORGIA.

Fulton County.
PERSONALLY appears, *Thomas W. Long* 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 *10th* day of *July* 1861; 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 *H*, of *5th* Regiment of *Georgia* Volunteers *1st* Brigade; that whilst engaged in such military service, at the battle of *Gettysburg* in the State of *Pennsylvania*, on the 23rd day of *July* 1862, he was wounded as follows: *By a fire shot, which passed some 100 yds. from him, the bullet struck him in the right leg, fracturing the bone, and he was unable to move for some time. He was then carried to the hospital, and he has since been unable to use his leg, and he is now disabled.*

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

Sworn to and subscribed before me, this *9th* day of *Dec* 1889
Thomas W. Long
Christine M. Long

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

STATE OF GEORGIA.

Fulton County.
PERSONALLY comes before me *W. L. Calhoun* ordinary of said county, *W. S. Kendrick* and *A. B. Schwaab*, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *W. H. Long* and after such examination say that the applicant has been injured as follows: *Apparently by a gunshot wound of right leg shattering tibia near the ankle. Extending upward about 3 inches, causing the bone around the wound to become exposed. Bone is of black color, wound still suppurates. Applicant has to use a crutch or stick in walking. We consider that said wound renders the limb useless, substantially & essentially useless.*

Sworn to and subscribed before me, this *9th* day of *February* 1889
W. L. Calhoun
W. S. Kendrick
A. B. Schwaab
DIRECTOR
ORDINARY.

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

STATE OF GEORGIA.

Fulton County.

I, *M. L. Leachman* Ordinary of said county, do certify that I am well acquainted with *Thomas W. Leachman*, 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: *M. B. Kendrick* and *A. B. Ashbrook*

are persons of respectability, and that their statements are worthy of full credit and belief. I further certify that *E. D. Whitham* before whom the foregoing affidavits were made and power of attorney was signed, is a *Notary Public* of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *9* day of *July* 188*9*
M. L. Leachman
Ordinary *Fulton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton 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*9*

Executed in the presence of us: _____

DIRECTION:

Send money to me as follows, by _____

to _____

County, Georgia.

NOTES.

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

STATE OF GEORGIA,

Fuller County.

I, *W. L. Roalson* Ordinary of said county,
do certify that I am well acquainted with *Thos. W. Long* 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 *5th* day of *February* 189*0*

W. L. Roalson

Ordinary

Fuller

County.

*Long, Thomas W.
Fuller Co.*

1890.

Long, Thomas W.

No. *242*
APPLICATION FOR ALLOWANCE.

THE TALL SHERIFFS OF THE

Right leg disabled

Applicant, *Thos W Long*

County, *Fuller*

Amount, *\$50.00*

Date of warrant, *Feb 3-*

Entered on record

Feb 5th 1890

Signature of Sheriff

WARRANT ISSUED TO

Applicant

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fullon County.

PERSONALLY appears *Thos. M. Long* of *Fullon* 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 *17th* day of *18*; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the

States, and served as a *Private* in Company *D*, of *3rd* Regiment of *Georgia* Volunteers *Wright*'s Brigade; that whilst engaged in such military service, at the battle of *Seven Days Fight* in the State of *Pa* on the *25th* day of *June* 1862, he was wounded as follows: *gun shot wound of right leg just above the ankle shattering the bone and rendering it immovably and permanently useless - while supporting*

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

Sworn to and subscribed before me, this the *5th* day of *February* 189*0*

Thos. M. Long

W. L. Baltham

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

POWER OF ATTORNEY.

STATE OF GEORGIA

Fullon 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 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 *5th* day of *February* 189*0*

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

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

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

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by _____

to _____

P. O.

County, Georgia.

Audited Feb. 9 1889.

Wm. S. Mighels
COMPTROLLER GENERAL.

Fulton
Maimed Soldiers.

Voucher No. 312

Amount \$ 50

Paid to *Thos. N. Long*

For *Right Leg*

Disabled

Feb. 9 1889

Included in Warrant No.

issued to Treasurer.

1889

WARRANT CLERK

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

Applicant

Audited Feb. 5 1890

Wm. S. Mighels
COMPTROLLER GENERAL.

Maimed Soldiers.

Voucher No. 242

Amount \$ 50

Paid to *Thos. N. Long*

For *Right leg*

Disabled

Feb. 5 1890

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK

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

Applicant

No. 312
STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Feby 9 1889

Mr. Thomas W. Long of the County
of Mullin having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,

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

Right Leg disabled

He is entitled to receive the sum of \$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 the receipt on this voucher, and return same to
Executive Department for warrant.

By the Governor

W. H. Hamisen

CLERK EXECUTIVE DEPARTMENT.

50.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty or

per above voucher, this

9 of Feby 1889.

Thomas W. Long.

No. 212
STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Feby 5 1890

Mr. Thomas W. Long of the County
of Mullin 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 \$500.00 Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890

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

By the Governor,

W. H. Hamisen

CLERK EXECUTIVE DEPARTMENT.

\$ 50.00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty or

per above voucher, this

5 of Feby 1890

Thos W Long

NAME, Long, Thos J.

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

COMPANY AND REGIMENT? Private, Co. K, 3d Regiment Ga. Vols.
Wright's Brigade.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? At Richmond Va., June 25, 1862 shot in right leg near ankle.

CAPTURED, WHEN AND WHERE?

RELEASED,

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES, None.

P.O. 1869

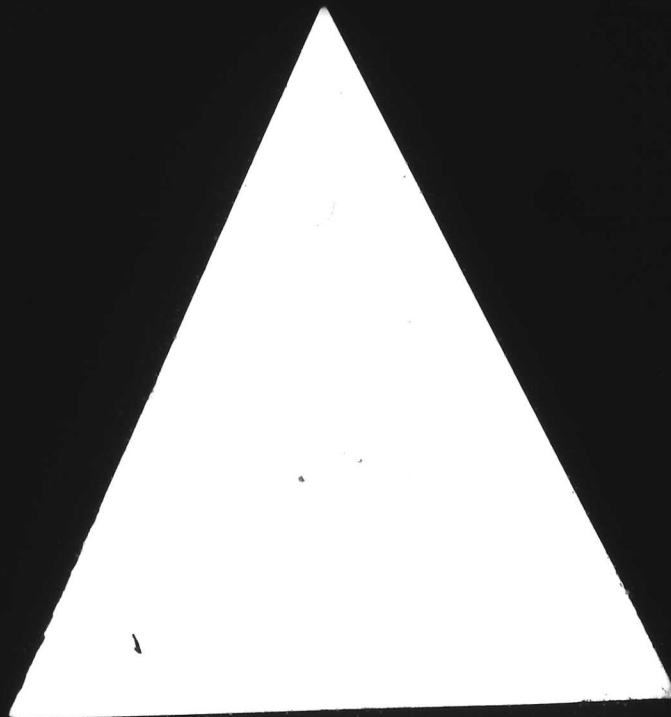
COUNTY. Fulton

FURIED,

WITNESSES, None.

P.O. 1889

COUNTY. Fulton



Enl. to Sept. 3,
1863. Last roll
which name is *Long*
for Nov. Dec. 1863
shows him taken
sick in hospital
since Sept. 12,
1864. (11112)

Married in 1864,
Sept. 11, 1864.
Roll for Nov. Dec.
1864 last on which
name is *Long*, shows
taken sick since
Sept. 12, 1864, as sick
for 30 days
NR.

Married in 1864,
Sept. 11, 1864. Last
roll for Nov. Dec.
1864 shows him
taken sick since
Sept. 12, 1864, as sick
for 30 days
NR.

Long, William J.
Fulton Co.

Oct 1918
No. *75-1917*

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County *Fulton Co.*
Name *William J. Long*
Company *A.*
Regiment *27th Ga. Infantry*
Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. F. BYRD, State Printer, Atlanta.

7/5-1917

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Fulton County.

Wm J Long of said State and County is hereby presented as a witness in support of the application of Wm J Long 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? Wm J Davis
Eatonville Ga
2. How long and since when have you known Wm J Long the applicant?
Since 1863
3. Where does he now reside, and since when has he been a bona fide, contiguous resident in this State and how do you know? At his address Atlanta Ga, 227 1/2 Ave
as I know since 1863 (See his answer)
4. When, where and in what Company and Regiment did he enlist during war from 1861 to 1865? (Give date and place) Sept 1863 Augusta Ga 47th Va Regt
5. How did you obtain your information of this Service? Member same Co
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) During his enlistment
7. When and where was his Command surrendered or discharged (give date and place)?
Granville Va April 26th 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? No
11. If not where was he and how came him there? See his answer
12. When did he leave his Command? See his answer Where was his Command when he left it? He for what cause did he leave? By whose authority did he leave? and how long was he granted leave? How do you know that you have stated to be true? If of your own knowledge (Tell clearly and specifically).
Was in Service with him
13. In what way was he prevented from returning to his Command? See his answer How do you know? Yes
14. What effort did he make to return to his Command and how do you know?
Did not
15. Was applicant captured as a prisoner? Yes If so, when and where? In what prison was he held? and when released?

Sworn to and subscribed before me, this the

28 day of July 1917

Wm J Davis (Ordinary,

of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes R. J. Rice Gas P. Roper who on oath says that they are freeholders residing in said County and we know W. J. Long the applicant for pension and we know the property that is now in the use, possession and control of himself and of its cash value to wit: (Make List by items and value.) None

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items.) 280 acre farm in Gwinnett County, sold about 1912 to E. R. Fisher, Gandler Building, Atlanta, Ga.
2. When and to whom was it sold or given to? see answer next above
3. What was the price paid or stated to be paid? \$6,700.00.
4. What relation is the party to applicant? None
5. What disposition was made of the proceeds of the sale? Current expenses paid.
6. Was the disposition of this property made in good faith and full value? Yes. or was it made to obtain a pension? No.

Sworn to and subscribed before me, this the

28th day of August 1917.

William R. Rice Ordinary,

Gas P. Roper

of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I Thos H. Jeffers Ordinary of said County, certify that I know the applicant Wm J Long for Pension is the person he represents himself to be and resides in said County. That I also know R. J. Rice Gas P. Roper the witnesses swearing to the service and R. J. Rice Gas P. Roper 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 Wm J Long value for tax is in 1908 \$ None for 1909 \$ None for 1910 \$ None for 1911 \$ None for 1912 \$ None for 1913 \$ None for 1914 \$ None for 1915 \$ None

Sworn under my hand and official seal of office this

28th day of Aug 1917

Thos H. Jeffers 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 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 think spouses are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self affidavits of freeholders unnecessary.

12. When did he leave his Command? See his answer Where was his Command when he left it? See his answer for what cause did he leave? See his answer

By whose authority did he leave? See his answer and how long was he granted leave? See his answer How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) Was in service with them

13. In what way was he prevented from returning to his Command? See his answer How do you know? See his answer

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

15. Was applicant captured as a prisoner? See his answer If so, when and where? See his answer In what prison was he held? See his answer and when released? See his answer

Sworn to and subscribed before me, this the 25 day of July, 1917, L. M. Davis,
Ordinary,
 of DeKalb County.

said County. That I also know See his answer the witness swearing to the service and See his answer 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 See his answer shows that See his answer value for tax is in 1908 \$ None for 1909 \$ None for 1910 \$ None for 1911 \$ None for 1912 \$ None for 1913 \$ None for 1914 \$ None for 1915 \$ None

Sworn under my hand and official seal of office this 25 day of July, 1917,
See his answer 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 affidavits of freeholders unnecessary.

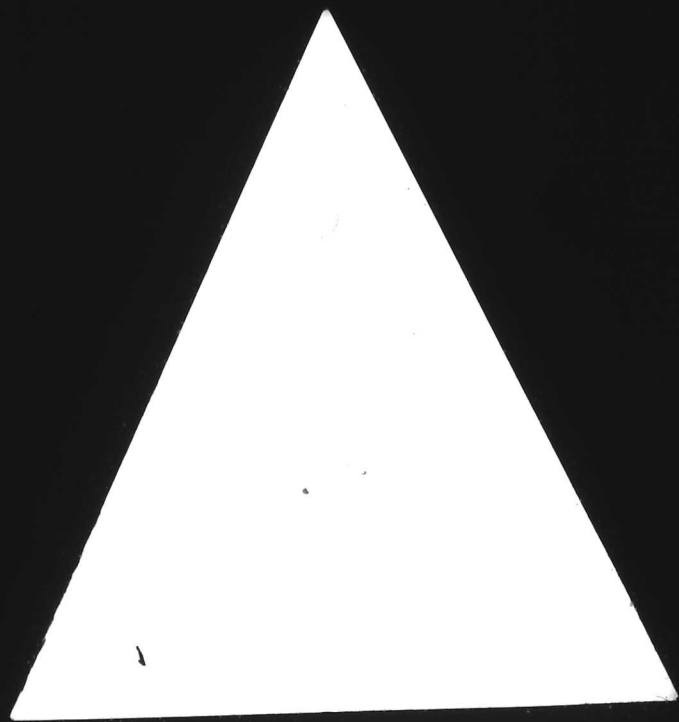
STATE OF GEORGIA
 ATTORNEY GENERAL'S OFFICE
 ATLANTA

CLIFFORD WALKER
 ATTORNEY GENERAL
 M. C. BENNETT
 ASSISTANT ATTORNEY GENERAL

"Exhibit A"
 Disposition of proceeds of sale of farm specified in answer to question 10, in Application for Pension of W. J. Long as per receipts and cancelled notes exhibited to Pension Commissioner, and returned to applicant.

(July 1, 1912 to July 1, 1917)

Board for family of three @ \$75.00 per month	4500.00
Rent @ \$13.60 per month	816.00
Doctor's bills (applicant stricken with paralysis January 25, 1903, since continuously and totally disabled)	500.00
Clothing for family of three	884.00
	\$2700.00



LONGINO, MRS. MAY H.
FULTON COUNTY

APPROVED JAN. 31, 1947, for Feb.

Widow's Application

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

County FULTON
Name Mrs. May H. Longino
Widow of Thomas Dick Longino
Date of Marriage Oct. 29, 1885
Date of Husband's Death Jan. 28, 1947
Company I, 2d
Regiment Georgia Cavalry 1947
Approved Jan. 31, 1947
Lillian Henderson
Director.

CONFEDERATE PENSION
RECORD DEPT., 404 State
Capitol, Atlanta, Ga.

THOMAS DICK LONGINO enlisted
as a private in Co. I, 2d
Regt. Ga. Cavalry Oct. 1, 1864.
Roll for Dec. 31, 1864, last
on file, shows him present.
Surrendered, SALISBURY, N. C.
May 1865.

Dr. Longino drew a Confederate
soldiers' pension in Fulton
County until his death Jan. 28,
1947.

Lillian Henderson
Lillian Henderson
Director.

Jan. 31, 1947.

THOMAS DICK LONGINO enlisted as a Private in Co. 20, 2d Regt. Ga. Cavalry, Oct. 1, 1864. Roll for Dec. 31, 1864, just on file, shows him present. Surrendered, SALISBURY, N. C. May 1865.

Dr. Longino drew a Confederate Soldiers' Pension in Fulton County until his death Jan. 29, 1947.

William Henderson
Director.

Jan. 31, 1947.

LONGINO, MRS. MAY H.
FULTON COUNTY
APPROVED JAN 31, 1947, for Feb.

Widow's Application

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

County FULTON
Name Mrs. May H. Longino
Widow of Thomas Dick Longino
Date of Marriage Oct. 29, 1885
Date of Husband's Death Jan. 29, 1947
Company I, 24
Regiment Georgia Cavalry 1947
Approved Jan. 31, 1947
William Henderson
Director.

CONFEDERATE PENSION AND
RECORD DEPT., 404 State
Capitol, Atlanta, Ga.

Centuri

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, May Hamilton Longino, 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. May Hamilton Longino, P.O. Hinton St. Longino, Retail Credit Co., Atlanta (Fulton County), Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? For 26 years, since March 18, 1880
Give date, or year, of your birth. March 18, 1860 Age: 86
3. (1) When, (2) where and (3) to whom were you married? Oct. 29, 1885
Dr. Thomas D. Longino, Fulton County, West End, near Atlanta, Ga.
- a. Have you married since the death of first and soldier husband? No
- b. When and where did your soldier husband die? Atlanta, Ga., Jan. 29, 1947
- 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? Husband has
- g. If so, in what county was first pension drawn and what year were you or your husband placed on rolls? Fulton County, 1919.

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.
Oct. 1, 1864, Campbell County, Ga., Co. I, 2d Regt. Ga. Cavalry. Captain G. C. Looney, Colonel C. C. Crews
2. When and where was the Command of your husband surrendered?
Salisbury, N. C., May 1865.
3. Was your husband personally present with his Command when it was surrendered? Yes.
4. If he was not present, state specifically and clearly where he was? ---
5. When did he leave the Command? At surrender.
- 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? No.
- i. If so, when and where? In what prison was he held and when was he released? ---

Sworn to and subscribed before me, this 1st day of January, 1947.
of Fulton County.
(SEAL OF ORDINARY)

May Hamilton Longino
Applicant.

Questions for Witness as to Marriage

STATE OF GEORGIA,

COUNTY.

_____ of said State and County is hereby presented as a witness in support of the application of _____ 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) _____
2. How long and since when have you known _____ applicant _____
3. Where does she now reside, and since when has she been, continuously, a bona fide resident citizen of this State? _____
4. When and to whom was she married? _____ How do you know? _____
5. How long and since when did you know _____ her husband? _____
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? _____

Were they divorced? _____

Sworn to and subscribed before me, this the _____

day of _____, 1928.

(Witness)

Ordinary

of _____ County.

(SEAL OF ORDINARY)

Ordinary's Certificate

STATE OF GEORGIA,

FULTON COUNTY.

I, Eugene Cunby, Ordinary of said County, do certify that I know Mrs. May Harrington Longino the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know the witness the witness the witness 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 1st day of January, 1928.
(SEAL OF ORDINARY) Eugene Cunby 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.

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 21 st. day of January, 1947.
(SEAL OF ORDINARY) Eugene Gurney 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.

Court of Ordinary

FULTON COUNTY

STATE OF GEORGIA

CERTIFIED COPY OF
MARRIAGE LICENSE
AND
CERTIFICATE OF MARRIAGE
OF

DR. THOMAS D. LONGINO

AND

MISS MAY HARRINGTON

Recorded in Book F Page 50

EUGENE GURNEY,

Ordinary.

Court of Ordinary

FULTON COUNTY

STATE OF GEORGIA

CERTIFIED COPY OF
MARRIAGE LICENSE
AND
CERTIFICATE OF MARRIAGE
OF

DR. THOMAS D. LONGINO

AND

MISS MAY HARRINGTON

Recorded in Book F Page 50

EUGENE GUNBY,

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

DR. THOMAS D. LONGINO

and

MISS MAY HARRINGTON

According to the rights 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 29th day of October 19 1885

W. L. CALHOUN

L. S.

~~Clerk of Court~~ Ordinary

I hereby Certify that

THOMAS D. LONGINO

and

MAY HARRINGTON

were joined together in the HOLY BONDS OF MATRIMONY

on the 29th day of October 1885, by me.

P. M. RYBURN, M. G.

State of Georgia,
Fulton County

S. S.

ORDINARY'S OFFICE

ATLANTA, GA., Jan. 31 19 87.

I, Y. J. YARBROUGH, Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

DR. THOMAS D. LONGINO

and MISS MAY HARRINGTON

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.

Y. J. Yarbrough
Clerk Court of Ordinary



State of Georgia,
Fulton County } S. S.

ATLANTA, GA., Jan. 31 19 47.

I, V. J. YARBROUGH, Clerk Court of Ordinary of said County, hereby certify
that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

DR. THOMAS D. LONGINO

and MISS MAY HARRINGTON
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.



V. J. Yarbrough
Clerk Court of Ordinary

Ordinary's Certificate

STATE OF GEORGIA.

COUNTY

I, Frederick Ordinary of said County, certify that I know

the applicant Thomas Dick Langston for person is the person he represents himself to be and resides in said county. That I also know 182 the witness swearing to the

service, that they are both 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.

Sworn to by me and official seal of office this 15 day of Oct 1914

of Frederick Ordinary
County

(SEAL)

NOTES: 1. Before any application is presented the Ordinary shall swear applicant and witnesses in the following words: "You do solemnly swear or affirm that you are the person named in the application and that you are the person named in the affidavit and that you are the person named in the statement of service." 2. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by said Ordinary.

Langston Thomas Dick
Frederick County
No.

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Frederick

Name Thomas Dick Langston

Company "B"

Regiment 2d Va. Cavalry

Approved

E. R. O.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-23-1919

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY }

I, Thos. H. Duffie, Ordinary of said County, certify that I know the applicant Thomas Dick Langston for pension is the person he represents himself to be and resides in said county. That I also know H. C. [unclear] the witness swearing to the service; that they are both 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.

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

[Signature] Ordinary
of Fulton County }

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and 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 give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

Confederate

Soldier's Application

Under Act 1910-As Amended by Act of 1919

County Fulton

Name Thomas Dick Langston

Company 4th

Regiment 2d Va. Cavalry

Approved

J. W. LINDSEY,

Commissioner of Pensions

Reed Printing Co., State Printing, Atlanta

10-23-1919

E. R. D.

Application for Soldier's Pension Under Act 1910

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,

Fulton COUNTY }

Thomas Dick Langston of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, 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) Thomas Dick Langston Fulton County, Atlanta Ga
2. How long and since when have you been a continuous resident citizen of this State? 7 1/2
3. Did you enlist in the Army of the Confederate States or in 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) October 1864 Columbus Ga Co. 1st Va Cavalry
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) until December 1864 8 months
6. When and where was your Company and Regiment surrendered or discharged from the Service? near Sandusky, Mich. December
7. Were you actually present with your command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were.
- a. Where was your command when you left it? _____
- 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? No
- j. If so, when, and where? In what prison were you held and when were you released? _____
9. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this

15 day of Aug, 1919

Thomas Dick Langston Ordinary
of Fulton County }

(SEAL)

Questions for Witness as to Service

STATE OF GEORGIA.

Fulton } COUNTY

George C. Loney of said State and County is hereby presented as a witness in support of the application of Thomas D. Long for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? George C. Loney
I reside in Atlanta Ga.
2. How long and since when have you known Thomas D. Long the applicant? I have known 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 Atlanta Ga. in 1864.
I know from having been intimate with him.
4. When, where and in what Company and Regiment did Thomas D. Long enlist during war from 1861 to 1865? (Give date and place.) At 1864. Palmetto Ga.
5. How did you obtain your information of this Service? I came across the Company when it was at Palmetto, Ga. in 1864.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date.) From 1864 to 1865.
7. When and where was his command surrendered or discharged (give date and place.) At 1865. Near Salisbury, N.C. Johnston's Army.
8. Were you personally present at the surrender? I was present at the surrender of it.
9. If not, where were you and how came you there? At 1865.
10. Was the applicant personally present with his command at surrender? At 1865.
11. If not where was he and how came him there? At 1865.
12. When did he leave his command? At 1865. Where was his command when he left it? At 1865. For what cause did he leave? At 1865. By whose authority did he leave? At 1865. and how long was he granted leave? At 1865. How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically. I know from having been intimate with him.
13. In what way was he prevented from returning to his command? At 1865. How do you know? At 1865.
14. What effort did he make to return to his command and how do you know? At 1865.
15. Was applicant captured as a prisoner? At 1865. If so, when and where? At 1865. and when released? At 1865.

Sworn to and subscribed before me, this the 1st day of August, 1917. } Geo. C. Loney
Charles D. Moore Ordinary
of Fulton County.
(SEAL)

In what prison was he held?and
when released
Sworn to and subscribed before me, this the
12 day of August 1917 } Geo. C. Loney,
Charles D. Moore, 66 Ordinary
of Austin County.
(SEAL)

NAME Longino, Thomas Dick. YEAR 1920 COUNTY Fulton.

WHEN AND WHERE BORN? Resident of Georgia since 1847.

ENLISTED WHEN AND WHERE? Oct. 1864 at Palmetto, Ga.

RANK:

COMPANY AND REGIMENT? Co. I. 2nd Georgia Cavalry.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? April 24, 1865 near Salisbury, N.C.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

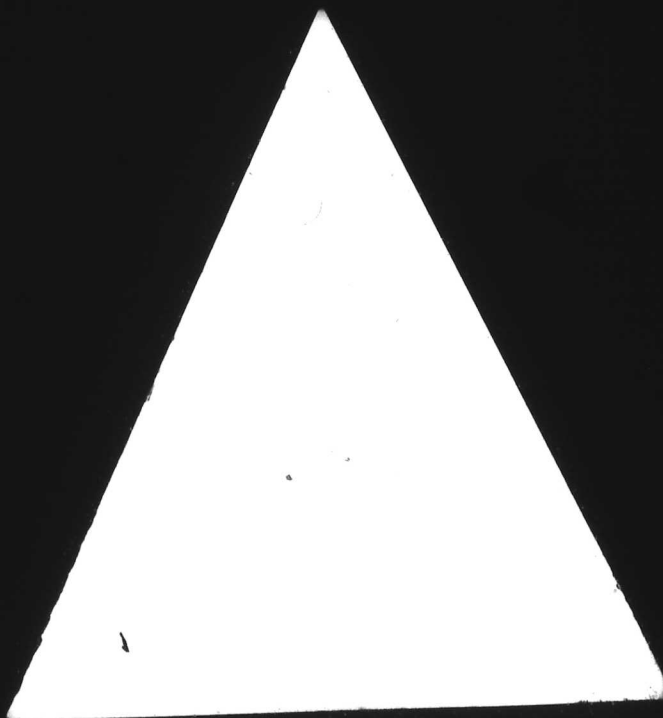
BURIED:

WITNESSES: George C. Loney-----same Command-----no data.

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: George C. Looney-----same Command-----no data.



F.

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.

Executed in presence of

INDIGENT PENSION

1906

Name *Charles Edwin*

County *Fulton*

a 1910

1906

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Obtain all with name of Applicant. Company and Regiment on back as indicated above.

Warrant and Pension on John W. Lindsey, Jr.

9/25/06

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

Charles Edwin Lindsey 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.)

Charles Edwin Lindsey, Georgia, Fulton Co., Atlanta.

2. How long and since when have you been a resident of this State? *Since 1875 to date.*

3. When and where were you born? *Lexington Co. South Carolina, Oct. 23, 1834.*

4. When and where and in what company and regiment did you enlist or serve? *1861. Co. E.*

White's Battalion, 2nd Regt. S. C. Troops, May 18th.

5. How long did you remain in such company and regiment? *From time of enlistment to surrender in 1865.*

1861

6. When and where was your company ~~and regiment~~ surrendered and discharged? *West Point, Ga.*

Paroled at Macon, Ga.

7. Were you present with your company and regiment when it was surrendered? *No.*

8. If not present, state specifically and clearly where you were, when you left the command, for what cause and by whose authority? *I was sent with seven men across the River by 16th of April 1865, when Wilson's Band attacked Fort Tyler.*

9. How much can you earn (gross) per annum by your own exertions or labor? *None.*

10. What has been your occupation since 1865? *Printer up to April 29, 1867.*

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? *Since April 29, 1867, I have been blind.*

of Georgia.

13. What property, real and personal, or income, do you possess, and its gross value? *None.*

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same? *No property, real or personal.*

No income.

15. In what County did you reside during those years, and what property did you then return for taxation? *Macon, Bibb Co., Ga. 1861-2-3, to April 29, 1867, then Atlanta, same.*

16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? *By my trade.*

up to near time of entering Collins House of Ga.

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *About \$100 could earn at my trade.*

18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year? *Printing during 1861-2-3, April 29, 1867, to 1867, same.*

19. Have you a family? If so, who composes such family? Give their means of support. Have they a home-stand, or other property? Their ages and how employed? *None.*

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? *No.*

22. How many applications have you ever made and under what class? *This is the first.*

Sworn to and subscribed before me this the _____ day of _____, 1906.

John W. Lindsey, Jr. Applicant.

of *Fulton* County.

Every Question MUST Be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

County.

of said State and County, having been presented

as a witness in support of the application of M. A. Bridges for pension under section 1254, Code, 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? Columbia Co Ga
2. Are you acquainted with B. Edwin Lewis, the applicant; if so how long have you known him? about Fifty years
3. Where does he reside, and how long and since when has he been a resident of this State?

4. When, where and in what company and regiment did he enlist, and how do you know? about the 3 of May 1861 at Columbia Co. Ga Co B 1st Regt
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty? until the Surrender
7. When and where was his command surrendered? The 16th day of April 1865

8. Were you present when it surrendered? Yes
9. Was applicant present? across the River
10. If he was not present, where was he? as above
- When did he leave his command? that morning For what cause? until the Surrender
- By what authority he left? by Order of Genl Waddle How do you know all of this? I was there

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 1901, 1902, 1903, 1904 and 1905, 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 1901, 1902, 1903, 1904 and 1905?

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

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code

19. Who composes family? What property have they? Children's ages 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 24th day of August 1906, by M. A. Bridges Applicant, W. D. Hamilton Witness, Charles A. B. C. Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally came before me Art Lindome and

W. D. Brown, both known to me as reputable physicians

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

OE Lewis, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

He is suffering from a stroke of paralysis which occurred in 1903. Eyes sight is getting very bad. He has had a great deal of vertigo, result of the arteriosclerosis of the blood vessels.

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

Sworn to and subscribed before me, this the

14 day of Sept 1906

John R. Williamson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, John R. Williamson Ordinary, in and for said County, hereby certify that the applicant OE Lewis resides in said County, and has

been a bona fide resident of this State since the 18 day of Sept 1896

and that the witnesses, viz: George A. Smith

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

Witness my hand and seal of office, this 14 day of Sept 1906

John R. Williamson Ordinary.

of Fulton County.

NOTES.

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

Richard A. Keith

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

COUNTY. }

_____, of said State and County, having been presented
as a witness in support of the application of _____ for pension
under section 1254, Code, and after being duly sworn true answers to make to the following questions, depose and
answers as follows:

1. What is your name and where do you reside? _____
2. Are you acquainted with _____, the applicant: if so how
long have you known him? _____
3. Where does he reside, and how long and since when has he been a resident of this State? _____
4. When, where and in what company and regiment did he enlist, and how do you know? _____
5. Were you a member of the same company and regiment? _____
6. How long did he perform regular military duty? _____
7. When and where was his command surrendered? _____
8. Were you present when it surrendered? _____
9. Was applicant present? _____
10. If he was not present, where was he? _____
When did he leave his command? _____ For what cause? _____
By what authority he left? _____ How do you know all of this? _____

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

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? *None From Personal association. Had no property.*

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? *Had none to convey. Son of Soldier Home Co.*

15. Is the applicant unable to support himself by labor of any sort; if so, why? *Yes. By age and infirmity.*

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? *By mother at the*

17. What portion of the support for these four years was derived from his own labor or income? *Travelling Business up to 1904. Since then income of Soldier Home*

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under
Section 1254, Code *all up to 1904. By Soldier Home Co.*

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

No Family.

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

Sworn to and subscribed before me, this the _____ day of _____ 1906; _____

John W. Williams Ordinary.

Witness.

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? By working at the
Dredging Bureau up to 1904. Since then owner of Golden Home
17. What portion of the support for these four years was derived from his own labor or income?
all up to 1904
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under
Section 1254, Code Ag. Paralysis. Indigo.
19. Who composes family? What property have they? Children's ages and their earning capacity?
No Family.
20. What interest have you in the recovery of a pension by this applicant? None
- Sworn to and subscribed before me, this the }
14 day of Sept 1906 } George A. Keith Witness.
John W. Williams Ordinary.

Swain, George
Fulton Co
OK Vol 412

**Confederate
Soldier's Application.**

✓ UNDER ACT 1810. ✓

County *Swain*
Name *Geo. C. Swain*
Company *2nd Co. Calvary*
Regiment

ENTERED ROSTER OFFICE
Approved *6/11/37*
J. W. LINDSEY
Commissioner of Pensions

9/20/37
ENTERED ROSTER OFFICE

STATE OF GEORGIA.

J. D. Longene of said State and County is hereby presented
as a witness in support of the application of Dr. E. Long 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:

12. When did he leave his Command? for September Where was his Command when he left it? We all came for What cause did he leave? We were By whose authority did he leave? for a winter and how long was he granted leave? for one time How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically). yes

- Sworn to and subscribed before me, this the

1st day of July 1911

of Fuller County

STATE OF GEORGIA.

Personally before me, Edw. Higgins, who on oath says that they are freeholders residing in said County and we know Dr. & Corbett the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of the cash value to wit: (Make list by items and value.) House on
Conferance Ave. the interest is worth
at the day the more than \$500. other
things worth about \$500

- Sworn to and subscribed before me, this the

day of 11- 1911

of Dutton County

STATE OF GEORGIA.

John Milthorpe Ordinary of said County, certify that I know the applicant John Milthorpe for Pension is the person he represents himself to be and resides in said County. That I also know J. B. Langens the witness swearing to the service and J. B. Langens + W. L. Liebert 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 Galton Barnette shows that J. B. Langens and wife value for tax in 1908 \$ none for 1909 \$ none for 1910 \$ none

Sworn under my hand and official seal of office this 14th day of Sep 1911

...Ordinary

of Fulton County

NOTES 1. Before any questions are answered the Ordinary shall swear applicants and all witnesses in the following words: "I swear that I will tell the truth and nothing but the truth in answer to each question asked you and the witnesses, you shall give oath in the presence of the Ordinary and the witnesses who are present."

2. **Applicants** shall be sworn in the following words: "I swear that I am not a bankrupt."
3. **All witnesses** shall be sworn in the following words: "I swear that I am not a bankrupt."
4. **If a witness is a proprietor or partner in a firm** he shall be sworn in the following words: "I swear that I am not a bankrupt, and that I am not under the control of said firm, and of the said firm, and of the said firm."

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Myrmis Looney the applicant, and that she is the lawful widow of Wm C. Looney, who was on the Pension Roll of said Fulton County, and was paid a Pension from Fulton County for 1927, and at the time of his death on the 18 day of April, 1927, there was due to him and unpaid his Pension of _____ Dollars from the State of Georgia, and I know _____, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 19 of July, 1927
(Seal of Ordinary)
Thos H. Jeffries Ordinary
Fulton County

Looney, W. C.
Fulton County
1927
Application for Pension Due
Deceased Soldier
(UNDER ACT 1931)
(To be paid to his Widow or Dependent
Children)

BY Myrmis Looney
Widow of W. C. Looney
Date of Marriage May 18 1901
Date of Death April 18 1927
Approved and ordered paid.
John W. Clark 1927
Commissioner of Pensions
Ordinary. Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-roll for permanent filing in the Pension Department.

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 1927, through my deceased husband, _____, who was on the Pension Roll and paid from _____ County for 19.
Witness my hand this _____ day of _____, 1927.
Attested before me: _____

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Myrmis Looney the applicant, and that she is the lawful widow of W. C. Looney, who was on the Pension Roll of said Fulton County, and was paid this a Pension from Fulton County for 1927, and at the time of his death on the 18 day of April, 1927, there was due to him and unpaid his Pension of _____ Dollars from the State of Georgia, and I know _____, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 14 of August, 1927
(Seal of Ordinary)
Thos H. Jeffries Ordinary
Fulton County

Looney, W. C.
Fulton County
1927
Application for Pension Due
Deceased Soldier
(UNDER ACT 1931)
(To be paid to his Widow or Dependent
Children)

BY Myrmis Looney
Widow of W. C. Looney
Date of Marriage May 18 1901
Date of Death April 18 1927
Approved and ordered paid.
John W. Clark 1927
Commissioner of Pensions
Ordinary. Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-roll for permanent filing in the Pension Department.

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 1927, through my deceased husband, _____, who was on the Pension Roll and paid from _____ County for 19.
Witness my hand this _____ day of _____, 1927.
Attested before me: _____

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)
(UNDER ACT APPROVED OCTOBER 3, 1901)

STATE OF GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Mrs. Minnie Loooney of said County, who after being duly sworn on oath says that she is the widow of

and that said Pensioner was on the Pension Roll of Fulton County

and was paid a Pension of (\$50.00) Dollars

from said County for 1927 and that the said Pensioner died in Fulton

County on the 18 day of April, 1927

and at the time of his death a Pension of \$ was due him from Fulton County

and unpaid for 1927 Applicant further swears that she married the said Ed Loooney

on the 15 day of May, 1902, in Fayette County and

State of Ga, and resided with him from the date of marriage to his death as his

lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be

paid to her.

Sworn to and subscribed before me this 9 day of June, 1927

Arthur B. Warburton, Ordinary } Mrs. Minnie Loooney
Fulton, County } (L. S.)
(Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Fulton County.

Personally before me comes _____, who

on oath says that he knew _____ while in life

and that he knows Mrs. _____, the

above applicant; and knows that the said _____

and _____ were in due form of law married in the County

of _____ in the State of _____ on

the _____ day of _____, 18____, and that they were residing

together as husband and wife at the time of his death on the _____ day of

_____, 19____, and that she is his dependent widow.

Sworn to and subscribed before me this _____ day of _____, 1926.

_____, Ordinary }
_____, County }
(Seal of Ordinary)

INSTRUCTIONS:

1st. This form is for widows of Service and Disabled Soldiers pensioners, who died after November 1st. If pensioner died after Jan-
uary 1st, 1927, the widow must be a widow, and her guardian may use this form in their stead.
2nd. Proof of marriage must be made.
3rd. The widow must be a widow, and her guardian may use this form in their stead.
4th. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the
seal affixed, and that both of certification, when filled in, shall be.
5th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make
the payment.
6th. Return this application with your final settlement to the Pension Department.
7th. The widow or person holding her pension must be a widow, and her guardian may use this form in their stead.
8th. Only the last name is required by this application. With a proper application, on the white blank, to which widow to refer in her
own right. November 1st is the last filing date for the next year's roll.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)
(UNDER ACT APPROVED OCTOBER 3, 1901)

STATE OF GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Mrs. Minnie Loooney of said County, who after being duly sworn, on oath says that she is the widow of

and that said Pensioner was on the Pension Roll of Fulton County

and was paid a Pension of Fifty Dollars (\$50.00) Dollars to me

from said County for 1927, and that the said Pensioner died in Fulton

County on the 18 day of April, 1927

and at the time of his death a Pension of \$ was due him from _____ County

and unpaid for 1927 Applicant further swears that she married the said _____

on the 15 day of May, 1902, in Fayette County and

State of Ga, and resided with him from the date of marriage to his death as his

lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be

paid to her.

Sworn to and subscribed before me this 19 day of August, 1927

Arthur B. Warburton, Ordinary } Mrs. L. C. Loooney
Fulton, County } (L. S.)
(Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, _____ County.

Personally before me comes _____, who

on oath says that he knew _____ while in life

and that he knows Mrs. _____, the

above applicant; and knows that the said _____

and _____ were in due form of law married in the County

of _____ in the State of _____ on

the _____ day of _____, 18____, and that they were residing

together as husband and wife at the time of his death on the _____ day of

_____, 19____, and that she is his dependent widow.

Sworn to and subscribed before me this _____ day of _____, 1926.

_____, Ordinary }
_____, County }
(Seal of Ordinary)

INSTRUCTIONS:

1st. This form is for widows of Service and Disabled Soldiers pensioners, who died after November 1st. If pensioner died after Jan-
uary 1st, 1927, the widow must be a widow, and her guardian may use this form in their stead.
2nd. Proof of marriage must be made.
3rd. The widow must be a widow, and her guardian may use this form in their stead.
4th. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the
seal affixed, and that both of certification, when filled in, shall be.
5th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make
the payment.
6th. Return this application with your final settlement to the Pension Department.
7th. The widow or person holding her pension must be a widow, and her guardian may use this form in their stead.
8th. Only the last name is required by this application. With a proper application, on the white blank, to which widow to refer in her
own right. November 1st is the last filing date for the next year's roll.

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.

I, Thos. H. Jeffries, Ordinary of said County, do certify that I personally know Mrs. Mary Ann Gentry, the applicant, and that she is the lawful widow of Geo. C. Gentry, who was on the Pension Roll of said Fulton County, and was paid a Pension from Fulton first quarter County for 1927, and at the time of his death on the 28 day of May, 1927, there was due to him and unpaid his Pension of _____ Dollars from the State of Georgia, and I know Grady Duffer, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 25 of May, 1927.

(Seal of Ordinary)

Thos. H. Jeffries, Ordinary
Fulton County

Looney & Co.
271 High Island Ave.
Fulton County

1925

Application for Pension Due
Deceased Soldier
(UNDER ACT 1891)
(To be paid to his Widow or Dependent
Children)

BY
Mrs. Mary Ann Gentry
Widow of Geo. C. Gentry
Date of Marriage May 15 1904
Date of Death April 28 1927

Approved and ordered paid.
John W. Clark
26 May 27
Commissioner of Pensions

Fill out above in full and send this to the Pension Department for approval before you pay out the money. If you do not do this, you will be liable for the money. If you do not do this, you will be liable for the money. If you do not do this, you will be liable for the money.

GEORGIA, _____ County, _____ of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1927, through my deceased husband, _____ who was on the Pension Roll and paid from _____ County for 1927. Witness my hand this _____ day of _____, 1927.

Attested before me:

(To Be Paid to His Widow or Dependent Children)
(UNDER ACT APPROVED OCTOBER 3, 1891)

Personally before me, the Ordinary of said County, comes Mrs. Annus Dooney
of said County, who after being duly sworn, on oath says that she is the widow of _____

and was paid a Pension of Fifty (\$50.00) Dollars
at quarter from said County for 1927, and that the said Pensioner died in Fullton

lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Arthur B. Harburt Ordinary }
 Fulton County } Mrs. Minnie L. Looney (L. S.)
 (Seal of Ordinary)

Fulton County } August 10, 1908

1. This form is for widows, Survivors and Eligible Single Dependents, who died after November 11, 1918, and who were entitled to a pension or gratuity. It is to be filled out by the person who is to receive the pension or gratuity. It is to be filled out by the person who is to receive the pension or gratuity. It is to be filled out by the person who is to receive the pension or gratuity.

Ordinary & Ex-officio clerk of the Court of Ordinary.

DEED, STATE AND COUNTY

BOOKED,

WITNESSES T. D. Longino - with applicant in service.
 or
 F. D.

No date.

I, J. J. Davis, Ordinary and Ex-officio clerk
of the Court of Ordinary do hereby certify that the above and foregoing
instrument of writing is a true and correct copy of the marriage license
of Mr. G. C. Looney, and Mrs. Minnie, Ellis. Recorded in record book, 'H.
page 38, now of file in my office.

Given under my hand and seal of office
this the 14th day of May, 1927

J. J. Davis
Ordinary & Ex-officio clerk of the Court of Ordinary.

State Dept. Public Welfare,
Atlanta, Nov. 25, 1937.

George J. Looney was elected
Captain of Co. I, 24 Regt. Ga.
Cavalry Apr. 25, 1862. Killed,
Charlotte, N. C., May 3, 1865.

Director Joint Info. 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. G. C. LOONEY**
Widow of **G. C. LOONEY**
Date of Marriage **May 15, 1902**
Date of Husband's Death **April 1927**
Company **2nd Regt. Ga. Cavalry**
Regiment **2nd Regt. Ga. Cavalry**
Approved **Dec 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. G. C. Looney**, 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 **Dr. T. D. Longino**,
the witness who swears to the ~~fact of her husband's death~~ 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:

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 each 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. G. C. Looney**, 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. G. C. Looney, 1096 Virginia Ave. N.E. Atlanta, Ga. Fulton County
2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? **All her life**
- Give date, or year, of your birth. **Dec. 10, 1871** Age? **65 years**
3. (1) When, (2) where and (3) to whom were you married? (1) **May 15, 1902**
(2) Feltbarn, Ga. (3) G. C. Looney
- a. Have you married since the death of first and soldier husband? **No**
- b. When and where did your first husband die? **April 1927 - Atlanta, Ga.**
- c. Were you residing together when he died? **Yes**
- d. If not, how long had you resided apart?
- e. Are you now a widow? **Yes**
- f. Have you or your husband heretofore been paid a pension by the State? **Husband (Fulton County)**
- g. If so, when and for what cause were you or your husband placed on the roll? **1918**

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 Infantry,
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?
- 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

4 day of **July**, 1937.
Thomas H. Jeffries, Ordinary
Fulton County.
(SEAL OF ORDINARY)

Mrs. G. C. Looney
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 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.

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
25 day of July, 1937.
R. Marshall C. C., Ordinary
 of Fulton County.
 (SEAL OF ORDINARY)

Mrs. G. C. Looney
 Applicant.

State of Georgia
 County of Fulton.

Personally before the undersigned authority now
 comes Dr. T. D. Longino who upon oath
 says that he knows Mrs. G. C. Looney and
 knows that she was living with her husband G. C. Looney
 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. Marshall
 C. C. Ordinary, Fulton Co. Ga.

T. D. Longino

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. G. C. LOONEY, WIDOW OF G. C. LOONEY,

has filed in this office an application for the
 Georgia pension allowed to widows of Confederate
 veterans; and it appearing that the late husband
 of this applicant performed actual military ser-
 vice as a Confederate soldier and was honorably
 separated from such service; and that applicant
 was married to said soldier prior to January 1st,
 1920, and that she was not remarried; it is, there-
 fore,

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.

L. T. Giam
 Director, Confederate Division
 State Department of Public
 Welfare

Georgia Gazette Co.
 I, Wm. Burch, Ord. Ex. Off. Clerk of Court & Ordinary
 of said County, hereby certify that the within is a
 true and correct copy of the marriage record
 of Mr. G. C. Leaney to Mrs. Minnie Ellis as the
 same appears on record in this office Book 38
 Page 38. In witness whereof I hereunto set my
 hand and seal of office. This June 17, 1937.
 Wm. Burch, Ordinary
 Ex. Off. C. C. O. Gazette Co.

MARRIAGE LICENSE
 OF
Mr. G. C. Leaney
 AND
Mrs. Minnie Ellis
 Issued May 15 1937
 and Recorded on Page 38 Book
38 of Marriage Licenses.
Wm. Burch
 Ordinary

Waiver of Parent or Guardian for Marriage License

_____, Ga., _____, 193____
 TO THE ORDINARY OF _____ COUNTY, GEORGIA:
 We, the parent }
 (or) guardian } of _____
 a female of the age of _____, hereby consent to issuance of marriage license to her and _____
 _____, and waive the posting of notice of same as required by law.
 _____ Parent.
 _____ Residence. _____ Parent.

I, Wm. Burch, Clerk of Court of Ordinance of said County, hereby certify that the within is a true and correct copy of the marriage record of Mr. E. C. Leaney to Mrs. Minnie Ellis as the same appears on record in this office Book 38 Page 38. In witness whereof I hereunto set my hand and seal of office this June, 17, 1902.

Wm. Burch Ordinary
 Clerk of C. C. O. Fayette Co. Ga.

MARRIAGE LICENSE

OF
 Mr. E. C. Leaney
 AND
 Mrs. Minnie Ellis
 Issued May 15 1902
 and Recorded on Page 38 Book
 "38"
 of Marriage Licenses.
 Wm. Burch
 Ordinary

Waiver of Parent or Guardian for Marriage License

TO THE ORDINARY OF _____ Ga., 1902
 COUNTY, GEORGIA:
 We, the parent }
 (or) guardian } of _____
 a female of the age of _____, hereby consent to issuance of marriage license to her and _____
 _____, and waive the posting of notice of same as required by law.

 Parent.

 Residence. _____
 Parent.

TO THE ORDINARY OF _____, Ga., 193_____
We, the parent } COUNTY, GEORGIA:
(or) guardian } of _____
a female of the age of _____, hereby consent to issuance of marriage license to her and _____
_____, and waive the posting of notice of same as required by law.

Parent.

Residence. _____ Parent.

No. 488

MARRIAGE LICENSE

STATE OF GEORGIA. COUNTY OF **VI**

TO ANY ONE OF JUST AGE AND SOUND MIND, OF FIRM BELIEF OF THE GOSPEL

Mr. J. C. Looney and *Mrs. Minnie Ellis*
You are hereby authorized to join
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,
within thirty days after the date of said Marriage.
Given under my hand and seal this 15 day of
May 1902 J. B. Lewis (L.S.)
Ordinary.

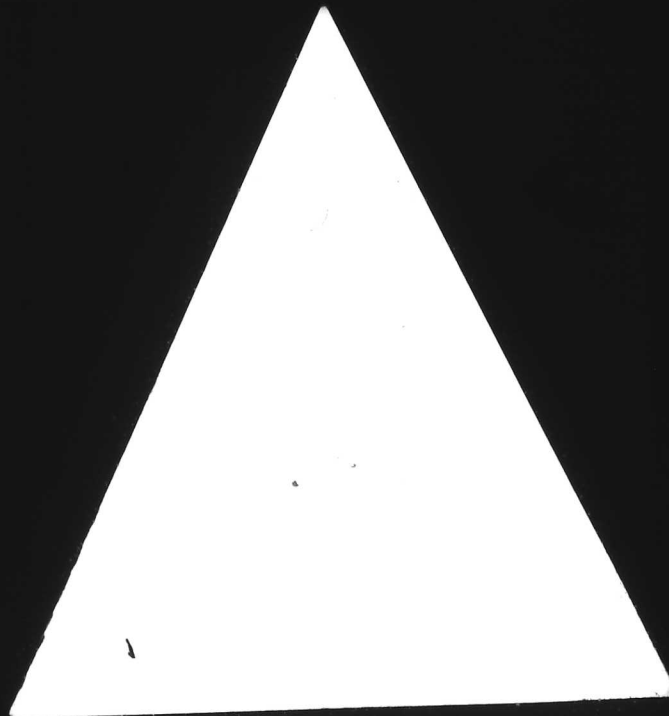
STATE OF GEORGIA **CERTIFICATE** FAYETTE COUNTY

I Certify that *Mr. J. C. Looney* and *Mrs. Minnie Ellis*
were joined in Matrimony by me this 15 day of May Nineteen Hundred
and Two

Recorded 19 D. M. Presley, M. G.
J. B. Lewis Ordinary.

LICENSE OBTAINED UNDER ACT OF

Recorded 19 _____
S. M. Presley, M. G.
Ordinary: _____
THE PARTY PERFORMING MARRIAGE CEREMONY RETURN TO ORDINARY



Pension Office
Nov 1-1910

Applicant's full
name & address
as required by
law & send to
Sergeant Hammond
a statement
for his death
to the County
of Cook

W. B. Linder
Care of Office

LOPER, Della M.
Fuller
County
Nov 1-1910

Widow's Pension

UNDER ACT 1910.

County Tuolumne

Name Mrs. Della M. Loper

Widow of Capt. J. H. Loper

J. W. LINDER
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

Nov 1-1910

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.
I, John P. Curran, Ordinary of said County do certify that, I know Mrs. Belle M. Lopez 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 Thomas B. & L. K. Hopkins the witness who swear to the service of husband, and Thomas B. & L. K. Hopkins 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 Belle M. Lopez Returned for Tax is for 1908 \$ none for 1910 \$ none

Sworn under my hand and official seal of office this 21 day of Oct 1910

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 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.

1. What is your name and where do you reside?
2. How long and since when have you known applicant?
3. How long and since when has she continuously resided in this State? (Give date.)
4. When and to whom was she married? How do you know?
5. How long and since when did you know her husband?
6. When, where and in what Company and Regiment did enlist?
7. Were you a member of the same Company?
8. How long within your personal knowledge did he perform actual military service with his Company and Regiment?
9. When, and where did his Command surrender, and was discharged?
10. Were you personally present when it was surrendered? If not where were you and how came you there?
11. Was the husband of applicant personally present at surrender? If not where was he? when, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all this? Do you state if of your own knowledge? (State all you know fully, and how you know it.)
12. For what cause, if you know of your own knowledge was he prevented from returning to his Command?
13. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? Sworn to and subscribed before me this the _____ day of _____ 1911
_____ Ordinary.
_____ County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.
Personally before me comes Susan H. & L. K. Hopkins who on oath says that they are freeholders of said County and that they know Mrs. Belle M. Lopez 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 nothing
Total nothing

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

Personal property nothing
Money, Notes and accounts nothing

Schedule (C).
We also know what property she has now in her possession, use and control to wit:

Acres of land worth nothing
Horses and Mules nothing
Cows and Hogs nothing
Other property none
Income and earnings none
Total Value of all property and effects none

Sworn and subscribed before me this the 14 day of Oct 1910
_____ County.

Pension Office
Nov 1-1910
Applicant's
to State of Georgia
as required by
law & order to
be sworn & sworn
to account
for husband's
to the County
of the County
of the County
of the County

Widow's Pension
UNDER ACT 1910:
Justin
County
Name *Mrs. Belle M. Loper*
Widow of *Capt. J. H. Loper*
J. W. Linder
Comptroller of Pension
10/23/11
7/5-1911

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

STATE OF GEORGIA,

Houston

County.

Personally before me comes *Mrs. Belle M. Loper* 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. Belle M. Loper 285 Crumley*
2. How long and since when have you been a continuing resident in the State of Georgia? *Seventeen years*
3. When, where and to whom were you married? *Capt. J. H. Loper, Grady Co., Ga.*
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.) *First Reg. Georgia Cavalry, 2nd Army, Official for South Carolina April 22, 1861, when he was sent to the front, and on June 2, 1864, he was discharged from the army.*
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 husband die? Were you residing together when he died? If not, how long and you resided apart? *He died in the hospital, Ga. 12/18/64. 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.) *One parcel of land for 17 years ago. owned nothing in Nov. 4, 1908.*
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 but ordinary wearing apparel*
12. What are your annual earnings or income and their value? *Nothing. I live with my son in Grady.*
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 *12th* day of *Oct* 1911, at *Houston* Ordinary. *Mrs. Belle M. Loper* County.

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

STATE OF GEORGIA,

County.

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

12. What are your annual earnings or income and their value? *nothing - their work my son in law.*

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 *12th* day of *Oct* 19*14* at *Lawrenceville* Ga.
of *Dade* County.

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA,
County, *Dade*

Personally before me comes *Mrs. Belle M. Lopez* who after being duly sworn true answers to make, to the following questions, answers as follows:

Lulton
Lopez, Belle M. (Mrs.)
1914

Application for Pension Due
Deceased Pensioner Un-
der Act 1904

Ordinary
For *General*
of *Belle M. Lopez* County
of Co. *Dade* Regiment

Approved and ordered paid

1914

J. W. LINDSEY,
Commissioner of Pensions

Georgia, *Dade* County.
I hereby authorize and designate *County, my lawd attorney, to collect and receipt for me in my name, the pension due to, *Belle M. Lopez* for 1914, now deceased, who was on the *Pension Roll from said County at his death.**
Witness my hand and seal, this *day of* *Oct* 19*14*
ATTEST BY *[Signature]*

Note 1.—Use this blank only when the Pension is waived to pay funeral expenses.

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.....

Harry G. Poole of said County, who, after being sworn, on oath says that
he knew Belle M. Lopez of said County, and that he was on

the 1913 Pension Roll Fulton County at the

time of his death, which occurred in Fulton County, in this

State, on the 8th day of July, 1914, and that

a Pension of Eighty Dollars was due him and

unpaid at the time of his death. That he left no widow or dependent children surviving him and no

estate of any value sufficient to pay his funeral expenses, which amounted to the sum of sixty

Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me

this 10th day of July, 1914.

John P. Wilkinson Ordinary

Fulton County

Georgia, Fulton County.

I, John P. Wilkinson Ordinary of said County, do certify

that I personally know Harry G. Poole 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 Belle M. Lopez while in life; that he

was the same person whose name appears on the Fulton Pension

Roll of Fulton County, and was paid a Pension

of Eighty Dollars in said County for 1914 and

I now believe him to be dead.

Given under my hand and official seal, this 10th day of July, 1914.

John P. Wilkinson Ordinary,

Fulton County.

of *Sixty* Dollars in said County for 1914 and

I now believe him to be dead.

Given under my hand and official seal, this *10th* day of *February*, 1914.

John R. Williams
Ordinary
County.

IN RE

W. F. CLAYTON,
ATTORNEY AT LAW.

PRACTICES IN THE STATE AND
UNITED STATES COURTS.

FLORENCE S. C. Sept 11th 1906

TO WHOM IT MAY CONCERN:

I, W. F. Clayton, late a Passed Midshipman in the Confederate States Navy, and at present Secretary of the Survivors Association of the Confederate States Navy. Do hereby certify, that John H. Loper, was an officer in the Confederate States Navy, and his record is as follows, that record being taken from the official reports of the United States.

Loper J. H. Born in South Carolina, Appointed from South Carolina, First Assistant Engineer April 25th 1861. First Assistant Engineer, Provisional Navy, June 2nd 1864.

Served on the U. S. S. Spray, and U. S. S. McRae, 1862 to 1864.

W. F. Clayton

Secretary Survivors Association C. S. Navy.

IN RE

W. F. CLAYTON,
ATTORNEY AT LAW.

PRACTICES IN THE STATE AND
UNITED STATES COURTS.

FLORENCE S. C.

15

State of South Carolina.

County of Florence.

Personally appeared W. F. Clayton, who being

sworn says, That he was a Passed Midshipman in the Confederate States Navy. That while he has no recollection of ever meeting J. H. Roper, he knows that he was a First Assistant Engineer, in the U. S. Navy, that deponent is the Secretary of the Survivors Association of the U. S. Navy, that the certificate he gave, dated Sept 11th 1906 as to the service of J. H. Roper, was taken from the official reports of the United States Navy Department, of Officers of the Confederate States Navy and that he knows the same to be true, As to his marriage deponent knoweth not,

Sworn to before me, this 10th

day of Sept. 1910,

J. L. Wilcox

Notary Public in & for A. R.

W. F. Clayton

IN RE

W. F. CLAYTON
ATTORNEY AT LAW

PRACTICES IN THE STATE AND
UNITED STATES COURTS

VS

FLORENCE S. C. Sept 16th 1910. 19

John L. Hopkins & Sons,
Attys At Law,
Atlanta Ga.

Gentlemen,

In answer to your letter, of Sept 16th I am sending you an affidavit. We have no ordinary in this state. We have a Judge of Probate, and as he is out of town to day, I take this affidavit before a Notary Public, who has all the powers under our law to take depositions. I hope you can get a pension for Mrs. Bessy Loper. If she is the wife of W. H. Loper, she is entitled. I know nothing of the marriage and nothing more than I have affirmed. I have often in and during my service of Four years in the U. S. Navy heard of Loper as an Engineer, but cant recall that I ever met him. The Spray, was one of our Gun Boats on the coast of Florida, the McCrea was one at Mobile or New Orleans. Time effaces memory, and I am not certain as to which but thing it was Mobile.

Yours Truly,

W. F. Clayton

Hope you can get this pension I am interested from my official position in seeing that our navy boys are not neglected.

W. F. C

M. Loper

THE MOST MODERN FUNERAL HOUSE IN THE UNITED STATES

2-8- Casket Box	50.00
Embalming	3.00
Hearse	5.00
Paid	60.00
2-10-14	
Harry G. Pool	

178

Loper Belle M.

Disapproved and filed 11-1-1910 for the reason that applicant fails to state and prove as required by law such a service and honorable accounting for husband to the close of the war.

Signed J. W. Lindsey Com Of Pensions

state of south carolina,

county of charleston.

Personally before me comes EVA P. MELLICHAMP, who
after being duly sworn true answers to make to the foregoing ques-
tions, answers as follows :

1. what is your name and where do you reside ?

Eva P. Mellichamp 114 Sumter St.
Charl. S.C.

2. How long and since when have you known Mrs. Belle M. Loper,
the applicant ?

Since 1866.

3. How long and since when has she continuously resided in
the state of georgia (give date) ?

I don't know.

4. when and to whom was she married ? How do you know ?

April 27th 1866 - to Capt. Falthus
Loper. I know this because they
lived as man & wife :
sworn to and subscribed
before me, this sept. 23 1910

W. C. BISHOP
NOTARY PUBLIC, S.C.
STATE OF SOUTH CAROLINA
COUNTY OF CHARLESTON

Eva P. Mellichamp
Affiant.

I, W. C. BISHOP, the Notary Public who administered
to Mrs. Eva P. Mellichamp the above oath, do hereby certify that there
is no officer in the state of south carolina known as an Ordinary,
and I do further certify that I am a Notary Public under the laws of
the state of south carolina duly qualified to administer oaths.

1. When and to whom was she married? how do you know?
*This 21st 1866 to my Father
Israel P. Fisher. I know this because they
lived as man & wife:*

sworn to and subscribed

before me, this sept. 21st 1910 }

[Signature]
Notary Public, S.C.
STATE OF SOUTH CAROLINA
COUNTY OF CHARLESTON

Eva P. Mellichamp
Agent.

I, W. C. BISHOP, the Notary Public who administered
to Mrs. Eva P. Mellichamp the above oath, do hereby certify that there
is no officer in the state of South Carolina known as an Ordinary,
and I do further certify that I am a Notary Public under the laws of
the state of South Carolina duly authorized to administer oaths.

[Signature]

Apr 9/88
Underhill

Lord, Russell G.
Hulton Co

No. *1888*

Application for Allowance

FOR

Applicant *RD Lord*
County *Hulton*

Amount

Date of Warrant

Entered on Record,

G. A. 385. 188-

Secretary Executive Department.

Amended
Oct 9/88

Application for Allowance

No. *1878*

Paul Russell G.
Fulton County

Applicant *Paul Russell G.*
 County *Fulton*

Amount

Date of Warrant

Entered on Record,

C. A. S. H. 188

Secretary Executive Department

R. E. Underhill

STATE OF GEORGIA,
Fulton County

PERSONALLY appears *Russell G. Ford* 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 *10th* day of *February* 188*8*; 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 *1st*, of *38th* Regiment of *Georgia* Volunteers *1st* Brigade; that whilst engaged in such military service, at the battle of *Fredericksburg* in the State of *Virginia* on the *13th* day of *May* 186*2*, he was wounded as follows:

He was shot in the right arm, the bullet passing through the arm and out the back, and he was unable to use his right arm for some time.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and makes application for the allowance to which he is entitled thereunder.

Sworn to and subscribed before me, this the *10th* day of *February* 188*8*.

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 _____ of the county _____ State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company _____ of _____ Regiment of Volunteers, and that deponent knows _____, and that he received the wounds, (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said _____, as stated by him in said affidavit. Deponent further states that said _____ is a *bona fide* citizen of this State, and resides in _____ county. Sworn to and subscribed before me, this _____ day of _____ 188

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

STATE OF GEORGIA,

Fulton County.

PERSONALLY came *W. H. McSwain, E. M. McSwain*
and *W. H. Burdett*
citizens of *Fulton* county, in said State,
who, being duly sworn, say that they are acquainted with *Russell D. Lox*

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 *Fulton* County, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this
4th day of *April* 1888

H. H. Burdett

STATE OF GEORGIA,

Fulton County.

PERSONALLY comes before me *W. L. Caldwell* Ordinary of said county,
W. H. McSwain and *W. H. Burdett*, both known to
me as reputable physicians of said County, who, being severally sworn, say on oath that they have
carefully examined *Russell D. Lox* and after such examination say that the
applicant has been injured as follows: *lost all the time he spent in the military service.*

and in the case of the said applicant
it is his duty to pay him a pension for the time he spent in the military service.

Sworn to and subscribed before me, this
4th day of *April* 1888

W. H. Burdett

W. L. Caldwell
ORDINARY

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

STATE OF GEORGIA,

Fulton County.

I, *W. L. Caldwell* Ordinary of said county,
do certify that I am well acquainted with *Russell D. Lox* the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in 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 *Beaton Jones* before whom the foregoing
affidavits were made and power of attorney was signed, is *N. P. & E. off J. P.*
of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this
4th day of *April* 1888
W. L. Caldwell
Ordinary *Fulton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton 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 Confed-
erate 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 *April* 1888

Executed in the presence of us:

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

herby authorize

of

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

at

by

Witness my hand and seal this

day of

1895.

Executed in presence of

26 Sept 22 July 1895
Proofs as to property
are not satisfactory
R. D. Lord
M. J. Johnson

Approved by me
No. 147
INDIGENT PENSION
1895.

Lawrence D. Lord
J. J. Johnson

pay 1896
RICHARD JOHNSON,
Secretary Executive Department

WARRANT HANDED TO
affch

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

R. D. Lord

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

1. What is your name and where do you reside? (give State, County and post office) *Russell D. Lord, Fulton County, Woodford Post Office.*
2. Where did you reside on January 1st, 1864, and how long have you been a resident of this State? *In Fulton, a resident of 57 years.*
3. When and where were you born? *In Hiram, Ga., 1838.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Confederate Army.*
5. When and where did you enlist? *at Camp Kershaw.*
6. In what company and regiment did you enlist? *In 31st Ga. Inf. Regt.*
7. How long did you remain in that company and regiment? *from 1864 till 1865.*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? *None at all.*
9. For how long a period did you discharge regular military duty? *The entire time.*
10. When, where and under what circumstances were you discharged from service? *I was discharged from the 31st Ga. Inf. Regt. at Camp Kershaw, Sept. 1865.*
11. What is your present occupation? *Nothing.*
12. How much can you earn per annum by your own exertions or labor? *Nothing.*
13. What has been your occupation since 1865? *Nothing.*
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *Eighty dollars, but I am unable to do any thing and have not been able to do any work for several years.*
15. What is your present physical condition and how long have you been in such condition? *Infirmary.*
16. 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.*
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are now blind and when and where you lost your sight? *For over thirty years.*
18. What property, effects or income do you possess? *None.*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *None.*
20. In what County did you reside during those years and what property did you then retain for taxation? *Fulton County, Ga. I sell out.*
21. How were you supported during the years 1893 and 1894? *By my children.*
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *Eighty dollars, but I am unable to contribute.*
23. What was your employment during 1893 and 1894? What pay did you receive in each year? *Nothing, nothing.*
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *I have a wife and 14 children. James, 28, John, 25, George, 24, William, 23, Mary, 21, Susan, 18, Martha, 16, Julia, 15, Mary, 14, John, 13.*

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

none at all
Sworn to and subscribed before me this the
16th day of April 1895,
W. L. Colburn Ordinary
of Fulton County.

his
Russell D. Ford
mark Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
County.

of said State and County, having been presented as a witness in support of the application of for pension under the Act approved December 15th, 1891, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?
W. H. Mitchell in Fulton County
2. Are you acquainted with *R. D. Ford*, the applicant, if so how long have you known him?
I have known forty years
3. Where does he reside, and how long has he been a resident of this State?
he has been in this County for forty years
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this?
I was in Company A of the 38th Ga Regiment and he was in the same Company and Regiment
5. When, where and in what company and regiment did he enlist?
Company A of the 38th Georgia Regiment
6. Were you a member of the same company and regiment?
yes
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service?
from 1861 until 1865 was discharged when he surrendered he was a good soldier and always prompt to his duty as a soldier
8. What property, effects or income has the applicant? (Give your means of knowledge.)
I don't know
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same?
I don't know
10. What is the applicant's occupation and physical condition?
a farmer and his physical condition is bad
11. Is the applicant unable to support himself by labor of any sort, if so, why?
on the account of a bad foot and leg which renders him unable to work
12. How was he supported during the years 1893 and 1894?
I don't know
13. What portion of his support for these two years was derived from his own labor or income?
I don't know
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1891?
on the account of a bad foot and leg which renders him unable to work
15. What interest have you in the recovery of a pension by this applicant?
none

Sworn to and subscribed before me, this
the 16th day of April 1895,
W. L. Colburn
Ordinary

W. H. Mitchell
Applicant

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Fulton County.

Personally came before me, *G. J. Pierre*, and *W. H. Rice*, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully *R. D. Ford*, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

He has Chronic Erysipelas in his right foot and leg of three or four weeks standing. Also has Chronic Rheumatism, old age and poverty.

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

Sworn to and subscribed before me, this
the 19th day of April 1895,
W. L. Colburn Ordinary
G. J. Pierre and *W. H. Rice*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Fulton County.

I, *W. L. Colburn* Ordinary in and for said County, hereby certify that the applicant *R. D. Ford* resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: *W. H. Mitchell* & *G. J. Pierre* & *W. H. Rice* 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 were signed.

I further certify that the tax digests of *Fulton* County show that applicant returned for taxation in his name in 1893, \$210⁰⁰ dollars of property, and in 1894, \$210⁰⁰ dollars of property.

Witness my hand and seal of office, this
19th day of April 1895,
W. L. Colburn 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."

the 16 day of April 1895.

W. L. Latham
Ordnance

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 _____

Lord, R. D.
Fulton Co

ACT OF 13 SEP. 1894.
(For Those Already Enrolled.)

No. 63

INDIGENT

Soldier's Pension.

1897.

Name _____
County _____

R. D. Lord
Fulton

Jan 13 1897.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Appt

SEC. 10. HEREON, STATE MASTER, ATLANTA.

No data

Lord, R. D.
Fulton Co

ACT OF 13 SEP. 1894.
(For Those Already Enrolled.)

NO. 393

INDIGENT

SOLDIER'S PENSION,
1898.

Name *R. D. Lord*
County *Fulton*

WARRANT ISSUED

1/12

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Appt

SEC. 10. HEREON, STATE MASTER, 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 _____ 1898.

[L. S.]

Executed in presence of _____

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *R. D. Lord* 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 *1885*; that he is *59* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Confederate*) during the war between the States, and served for the term of *4 years* in Company *10*, of *58*th Regiment of *Georgia*; that his physical condition is as follows: *Chronic inflammation of the lungs, chronic bronchitis, and loss of voice, etc.*; 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 1897. I have heretofore as a resident of *Fulton* county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, the _____ day of _____, 1897.

M. H. Hulsey Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this *11th* day of *January*, 1897.



M. H. Hulsey Ordinary *Fulton* County.

NOTE - The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *R. D. Lord* 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 _____ 1840; that he is *60* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Confederate*) during the war between the States, and served for the term of *4 years* in Company *1*, of *35*th Regiment of *Georgia*; that his physical condition is as follows: *Chronic inflammation of the lungs, etc.*; that his property consists of the following items

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

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

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

M. H. Hulsey Ordinary.

State of Georgia,

Fulton County.

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

Given under my official signature and seal, this _____ day of *January*, 1898.



M. H. Hulsey Ordinary *Fulton* County.

NOTE - The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

hereby authorize

of

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

at

by

Witness my hand and seal this

day of

1899.

Executed in presence of

(L. S.)

CODE SEC. 1364.

(For These Already Enrolled.)

No. 576

INDIGENT

SOLDIER'S PENSION,

1899.

Name *R. D. Ford*

County *FULTON*

WARRANT ISSUED

2/11

1899

RICHARD JOHNSON,

(Commissioner of Pensions)

WARRANT HANDED TO

John W. Lindsey

Gov. W. Harrison, State Printer, ALABAMA.

John W. Lindsey
Commissioner of Pensions

CODE SEC. 1364.

(For These Already Enrolled.)

NO. *576*

INDIGENT

SOLDIER'S PENSION,

1900.

Name *R. D. Ford*

County *FULTON*

WARRANT ISSUED

2/17

1900.

JOHN. W. LINDSEY,

(Commissioner of Pensions)

WARRANT HANDED TO

John W. Lindsey

Gov. W. Harrison, State Printer, ALABAMA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

hereby authorize

of

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

at

by

Witness my hand and seal, this

day of

1900.

[L. S.]

Executed in presence of

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County,

Personally appears C. D. Ford 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 _____ 1840, that he is 61 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 4 years in Company A, of 38th Regiment of Ga.; 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 1894. I have heretofore as a resident of FULTON county been allowed a pension for the year 1893

Sworn to and subscribed before me, this, the _____

day of _____ 1899.

W. H. Hulsey Ordinary.

State of Georgia,

FULTON County,

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

Given under my official signature and seal, this 11 day of June 1899.



W. H. Hulsey Ordinary FULTON County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County,

Personally appears C. D. Ford 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 _____ 1840; that he is 62 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 4 years in Company A, of 38th Regiment of Ga.; 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 1900. I have heretofore as a resident of FULTON county been allowed a pension for the year 1894

Sworn to and subscribed before me, this, the _____

day of June 1900.

W. H. Hulsey Ordinary.

State of Georgia,

FULTON County,

I, W. H. HULSEY Ordinary of said County, do certify that I am well acquainted with C. D. Ford the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 June 1900.



W. H. Hulsey Ordinary FULTON County.

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

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 _____

Lord P. P. P.
Carleton County
COUSE SECTION 12A.
(For Those Already Enrolled.)

No. *407*

INDIGENT

SOLDIER'S PENSION.
1901.

Name

County

WARRANT ISSUED

1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W. H. H.
Gen. W. Harrison, New Prison, Atlanta.

no date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears R. D. Lord 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 _____, 1860; that he is 65 years old and by occupation 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 C, of 38th Regiment of Ga; 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 Fulton county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the

8th day of January, 1901.

John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 8th

day of January, 1901.

John R. Wilkinson Ordinary Fulton County.



Note—The blank spaces must be filled.

Note—Affidavits should not be attested before January 1st, 1901.

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 _____

VOID. P. 13:
Fulton Co.
COUSIN SECTION 13A.
(FOR THOSE ALREADY ENROLLED)

No. 196

INDIGENT

SOLDIER'S PENSION

1902.

Name *R. D. Lindsey*

County *Fulton.*

Co. *A* Regiment *38*

WARRANT ISSUED

114

1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

WHL

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

no data

*Gord. R. D.
Fulton Co.*

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 _____

COUSIN SECTION 13A.
(FOR THOSE ALREADY ENROLLED)

No. 334

INDIGENT

SOLDIER'S PENSION

1907.

Name *R. D. Lindsey*

County *Fulton.*

Co. *A* Regiment *38*

WARRANT ISSUED

114

1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

WHL

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears R. D. Lord 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 1880; that he is 64 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company 9, of 34th Regiment of GA; 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 1902. I have heretofore as a resident of Fulton county been allowed a pension for the year 1901.

Sworn to and subscribed before me, this the

day of July 1902.

John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County,

do certify that I am well acquainted with R. D. Lord the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 July 1902.

John R. Wilkinson Ordinary Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears R. D. Lord 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 1838; 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 4 yrs in Company 11, of 35th Regiment of GA; 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 _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the

day of July 1907.

John R. Wilkinson Ordinary.

State of Georgia,

County.

I, John R. Wilkinson Ordinary of said County,

do certify that I am well acquainted with R. D. Lord the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 July 1907.

John R. Wilkinson Ordinary Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of

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

at

by

Witness my hand and seal, this _____ day of _____

1903.

[L. S.]

Executed in presence of

CODE SECTION 154

(FOR THOSE ALREADY ENROLLED)

No. 1379

INDIGENT

SOLDIER'S PENSION
1903.

Name

R. D. Lord

County

A

Co. *a*

Regiment *38th*

WARRANT ISSUED

1/20 1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

14

Wm. Harrison, State Printer, Atlanta

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 _____

1904.

[L. S.]

Executed in the presence of

CODE SECTION 154

(FOR THOSE ALREADY ENROLLED)

No. 179

INDIGENT

SOLDIER'S PENSION
1904.

Name

R. D. Lord

County

Fulton

Co. *b*

Regiment *38th*

WARRANT ISSUED

1/20 1904

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

14

Wm. Harrison, State Printer, Atlanta

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.)

Personally appears RO Lord 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 _____ 1840; that he is 65 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 4 yrs in Company A, of 38th Regiment
of 4th; 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 1903. 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 _____ 1903.

Ordinary.

STATE OF GEORGIA,

County.)

I, _____ Ordinary of said County,
do certify that I am well acquainted with RO Lord
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 space must be filled.
Note.—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fult. County.)

Personally appears RO Lord 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 _____ 1840; that he is 65 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 4 yrs in Company A, of 38th Regiment
of 4th; 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 _____
County been allowed a pension for the year 1903

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

Ordinary.

STATE OF GEORGIA,

County.)

I, _____ Ordinary of said County,
do certify that I am well acquainted with RO Lord
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 space 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

COOK SECTION 1234.
(FOR THOSE ALREADY ENROLLED.)

No. 444

INDIGENT

**SOLDIER'S PENSION
1905.**

Name

P. J. Lord

County

Fulton

Co.

A. Regiment 8th Reg

WARRANT ISSUED

49 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Ala

THE PENNELL 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

COOK SECTION 1234.
(FOR THOSE ALREADY ENROLLED.)

No. 140

INDIGENT

**SOLDIER'S PENSION
1906.**

Name

P. J. Lord

County

Fulton

Co.

A. Regiment 8th Reg

WARRANT ISSUED

47 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Ala

THE PENNELL PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears R. D. Lord 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 all his life 18 ; that he is 67 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company A, of 88th Regiment of Inf.; that his physical condition is as follows: Infirmary 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.

I Sworn to and subscribed before me, this the _____ day of _____ 1905.

Ordinary.

STATE OF GEORGIA.

Fulton County.

I, _____ Ordinary of said County, do certify that I am well acquainted with R. D. Lord the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 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 R. D. Lord 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 1848; 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 Georgia) during the war between the States, and served for the term of 4 yrs in Company A, of 88th Regiment of Inf.; that his physical condition is as follows: Infirmary 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 Fulton County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the _____ day of JAN 3 1906.

Ordinary.

State of Georgia,

Fulton County.

I, _____ Ordinary of said County, do certify that I am well acquainted with R. D. Lord the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____ County.



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

Georgia—Fulton County—

Personally appeared before me the undersigned authority, William Brown who on oath says he is personally acquainted with R. D. Lord, and has known him since the fall of 1885. I declare that he is in need and is unable to do any work for his support, and it is all caused by the condition of his leg. He is not able to go a large portion of his time.

And I swear further to swear that the said R. D. Lord is a man wholly without means or any support.

Subscribed and published before me this 21st day of Decr. 1895.
W. L. Buchanan
Notary Public

W. L. Buchanan

Ordinary

Georgia—Fulton County—

Personally appeared before me the undersigned authority, John Cobb, who on oath deposes & says, That he is personally acquainted with R. D. Lord, and has known said Lord for about twenty five years, and has been his neighbor for about twenty years. And I swear that the said R. D. Lord is in need and entirely without any means of support, and that he is not in a condition to do any work to earn a living by reason of the condition of his leg.

Subscribed and published before me this 21st day of Decr. 1895.
W. L. Buchanan
Notary Public

John Cobb

Subscribed and published before me this 21st day of Decr. 1895.
W. L. Buchanan
Notary Public

W. L. Buchanan

Ordinary

in laws or any support -
Subscribed and published before me & certify
that the witness is truthful
& entitled to relief
November 21st 1895
W. L. Buchanan
Ordinary

W. L. any work it was
a living by Rosen of the
Candidates' of his leg,

John L. Lott
Mark

Subscribed and published before me &
certify that the witness is truthful
and entitled to relief. Nov 21st 1895

W. L. Buchanan

Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I,

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

1885.

Executed in presence of

lawfully authorize

Lott, Wm. A. Cor. St.
Richard Johnson
Ex-7489
Fuller G.
INDIGENT PENSION
1895.

Name *Wm. J. Lott*

County *Fuller*

Ground

July 1 1886-1888

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

attg

Geo. W. Harrison, State Printer, Atlanta.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me Dr. J. M. Crawford and Dr. W. J. Lott, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully Mr. W. J. Lott, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

Totally blind from Glaucoma.

A. M. Anderson, M.D.

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 30th day of April 1895.

M. L. Kallum

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, M. L. Kallum, Ordinary in and for said County, hereby certify that the applicant W. J. Lott 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: Dr. J. M. Crawford and Dr. W. J. Lott, 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 were signed.

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1893, \$0.00 dollars of property, and in 1894, \$0.00 dollars of property.

Witness my hand and seal of office, this 30th day of April 1895.

M. L. Kallum 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."

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Fulton County.

I, W. J. Lott, of said State and County, desiring to avail himself of the Pension Act approved December 16th, 1894, hereby submits 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 post office)
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
3. When and where were you born?
4. Did you volunteer in the Confederate Army or in the Georgia Militia?
5. When and where did you enlist?
6. In what company and regiment did you enlist?
7. How long did you remain in that company and regiment?
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
9. For how long a period did you discharge regular military duty?
10. When, where and under what circumstances were you discharged from service?
11. What is your present occupation?
12. How much can you earn per annum by your own exertions or labor?
13. What has been your occupation since 1865?
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income?
15. What is your present physical condition and how long have you been in such condition?
16. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second "infirmary and poverty" or third "blindness and poverty"?
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?
18. What property, effects or income do you possess?
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same?
20. In what County did you reside during those years and what property did you then return for taxation?
21. How were you supported during the years 1893 and 1894?
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
23. What was your employment during 1893 and 1894? What pay did you receive in each year?
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support.

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

Am not

Sworn to and subscribed before me this the

23rd day of April 1895.

W. L. Ballman Ordinary

of *Miller* County.

W. J. Lott Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Hall County.

W. L. Marler

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

1. What is your name and where do you reside? *W. L. Marler, Gainesville Hall County, Georgia*
2. Are you acquainted with *W. J. Lott*, the applicant, if so how long have you known him? *I have known him for more than 30 years*
3. Where does he reside, and how long has he been a resident of this State? *He resides in or near Atlanta and has lived in this State all his life.*
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *I know that he served in the Confederate army for 3 years with him*
5. When, where and in what company and regiment did he enlist? *in Capt D. A. Leary's Company B. 16th Ga Bat. Cavalry*
6. Were you a member of the same company and regiment? *I was not*
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *he enlisted in May or June 1862 and served to the close of the war*
8. What property, effects or income has the applicant? (Give your means of knowledge.) *I know of none that he has - until he left Hall County he lived near me*
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *I know of no property or effects that he had in the years named*
10. What is the applicant's occupation and physical condition? *a farmer and mechanic he is entirely blind*
11. Is the applicant unable to support himself by labor of any sort, if so, why? *yes is because of his blindness*
12. How was he supported during the years 1893 and 1894? *I do not know except what I have learned from his children*
13. What portion of his support for these two years was derived from his own labor or income? *none that I know of*
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *I cannot do this, except that he is blind and unable to labor*
15. What interest have you in the recovery of a pension by this applicant? *not a thing*

Sworn to and subscribed before me, this

the 13th day of April 1895.

W. L. Marler
J. R. Randolph
Atty.

W. J. Lott

I am of full age and of sound mind and memory and I will swear to make and state the true and correct answers to the questions asked of me.

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 _____

ACT OF 13 DEC. 1894.
(For Those Already Enrolled.)

No. 64

INDIGENT

Soldier's Pension.

1897.

Name *Wm J Lott*
County *Fulton*

1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED TO

Wm J Lott

No data

Lott, W. J.

Fulton Co

ACT OF 13 DEC. 1894.

(For Those Already Enrolled.)

No. 394

INDIGENT

SOLDIER'S PENSION,

1898.

Name *Wm J Lott*
County *Fulton*

WARRANT ISSUED

1/12

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED TO

Wm J Lott

No data

ACT OF 13 DEC. 1894.

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 _____

STATE OF GEORGIA,

that his property consists of the following items

11th day of January 1897. }
 W. H. C. C. S. Ordinary.

STATE OF GEORGIA,

Given under my official signature and seal, this
day of January 1897.



NOTE—The blank spaces must be filled

STATE OF GEORGIA,

that his property consists of the following items

12 day of Jan 1898.
W. H. Murray Ordinary

State of Georgia,

Given under my official signature and seal, this 12-16-7
day of Jan 1898.



NOTE.—The blank spaces must be filled

Ordinary *Feltman* County.

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 _____ 1899.

Executed in presence of _____ (L. S.)

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 575

INDIGENT

SOLDIER'S PENSION,

1899.

Name *Wm. G. Lott*

County FULTON

WARRANT ISSUED

1/21 1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

Wm. G. Lott

Geo. W. Harrison, State Printer, Atlanta.

*Lott William G.
Fulton County*

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.]

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 407

INDIGENT

SOLDIER'S PENSION,

1900.

Name *Wm. G. Lott*

County FULTON

WARRANT ISSUED

Jan 14 1900.

JOHN. W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Wm. G. Lott

Geo. W. Harrison, State Printer, Atlanta.

Wm. G. Lott

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
FULTON County.

Personally appears Wm J. Lott 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 1835 day of 1835; that he is 64 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 3 years in Company D, of 16th Regiment of Ga. Bat.; that his physical condition is as follows:

Totally Blind

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 1899. I have heretofore as a resident of FULTON county been allowed a pension for the year 1898.

Sworn to and subscribed before me, this, 20 day of Jan, 1899. Wm J. Lott mark
Wm J. Lott Ordinary.

State of Georgia,
FULTON County.

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

Given under my official signature and seal, this 26 day of Jan, 1899.



Wm J. Lott
Ordinary FULTON County

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
FULTON County.

Personally appears Wm J. Lott 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 1835 day of 1835; that he is 65 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 3 years in Company D, of 16th Regiment of Ga. Bat.; that his physical condition is as follows:

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this, 16 day of Jan, 1900. Wm J. Lott mark
Wm J. Lott Ordinary.

State of Georgia,
FULTON County.

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

Given under my official signature and seal, this 16 day of Jan, 1900.



Wm J. Lott
Ordinary FULTON County

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

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 _____

John W. Lindsey
John W. Lindsey
COSE METHOD 124.
(For These Already Enrolled.)

No. *287*

INDIGENT

SOLDIER'S PENSION.
1901.

Name *Wm. J. Lee*
County **FULTON**

WARRANT ISSUED
John W. Lindsey 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey
Chas. F. Barnes, State Printer, Atlanta.

Wm. J. Lee

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears

Wm. J. Lott

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 Jan 1886; that he is 66 years old and by occupation Janitor 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 2 yrs in Company D, of 16th Regiment of Ga Cal; that his physical condition is as follows:

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. 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

16 day of

Jan

1901.

John R. Wickulson Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John R. Wickulson

Ordinary of said County,

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

Given under my official signature and seal, this 16

day of

Jan

1901.

John R. Wickulson Ordinary

Fulton County.



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

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 _____

COUS BROTHER EIA.
(FOR THOSE ALREADY ENROLLED.)

No. 345

INDIGENT

SOLDIER'S PENSION
1902.

Name *Wm. J. Galt*

County *Fulton.*

Co. *D* Regiment *16*

WARRANT ISSUED

1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. J. Galt
Gen. W. Harrison, State Printer, Atlanta.

no data

*Galt, William J.
Fulton County*

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears Wm J Latt 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 Ga) during the war between the States, and served for the term of 3 yrs in Company B, of 12th Regiment of Ga Bat; that his physical condition is as follows:

that his property consists of the following items

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1890, 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 1901

Sworn to and subscribed before me, this the

day of July, 1902

Wm J Latt
Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson, Ordinary of said County,

do certify that I am well acquainted with Wm J Latt the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 July, 1902

John R. Wilkinson
Ordinary

County.

Note.—The blank spaces must be filled.

Note.—Affidavits should not be attested before January 1st, 1902.



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



John R. Wilkinson
Ordinary _____ County.

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

Love G. B.
Fulton Co
Indigent
No. _____

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

County *Fulton*
Name *G. B. Love*
Company *E*
Regiment *2nd Ga. Cavalry*

Approved _____

J. W. LINDSEY,
Commissioner of Finance.

FILED IN THE OFFICE OF THE COMMISSIONER OF FINANCE

1864

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) *W. B. Love, Fulton County Atlanta Ga 121 Davis Street*
 2. How long and since when have you been a continuous resident citizen of this State? *All my life 63 years*
 3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? *Yes*

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) *At Richmond Va. Dec 2nd 64. Co. H. 1st Va. Heavy Artillery*

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) *about 12 months, discharged April 1865*

6. When and where was your Company and Regiment surrendered or discharged from the Service? *When Johnston's army was forced to leave at Smith's Cross Roads, Va. we were ordered to Albany Ga. We then went to the State Prison at Milledgeville Ga.*

7. Were you actually present with your Command when it was surrendered or discharged? *Yes*

8. If you were not actually present, state specifically and clearly where you were. *I was present*

a. Where was your Command when you left it? *Did not know*

b. When did you leave the Command? *Did not know*

c. For what cause did you leave? *Did not know*

d. By whose authority did you leave? *Did not know*

e. For how long was your leave granted? In what way? *Did not know*

f. Why did you not return to your Command after leave expired? *They left at*

g. In what way were you prevented? *Did not know*

h. What effort did you make to return? *Did not know*

i. Were you captured during the war? *See Johnston's army*

j. If so, when, and where? In what prison were you held and when were you released? *At Milledgeville Ga. and then transferred to Milledgeville Ga.*

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.) *We did not have anything*

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 what*

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 what*

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? *None*

Sworn to and subscribed before me, this the *10th* day of *August* 1910

W. B. Love Ordinary,

of *Fulton* County.

Confederate

Soldier's Application.

UNDER ACT 1910.

County *Fulton*

Name *W. B. Love*

Company *Co. H*

Regiment *1st Va. Heavy Artillery*

Approved

J. W. LINDSEY,

Commissioner of Pensions

CHAS. F. BIRD, STATE PRINTER, ATLANTA.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Fulton County.

William Henry & Simpson Pickens of said State and County is hereby presented as a witness in support of the application of C. B. Love 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? William Henry & Simpson Pickens
How long and since when have you known the applicant? Since the Spring of 1864.
2. Where does he now reside, and since when has he been a bonafide, continuing resident in this State and how do you know? In Atlanta Ga.
3. When, where and in what Company and Regiment did C. B. Love enlist during war from 1861 to 1865? (Give date and place) in Spring of 1864 at Andersonville Ga.
4. How did you obtain your information of this Service? By seeing him in said Regiment.
5. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) from Spring of 1864 until surrender.
6. When and where was his Command surrendered or discharged (give date and place) at Albany Ga. in the Spring of 1865.
7. Were you personally present at the Surrender? Yes. Mr. Love was present.
8. If not, where were you and how came you there? He was present.
9. Was the applicant personally present with his Command at surrender? Yes.
10. If not where was he and how came him there? He was there.
11. When did he leave his Command? When he disbanded. 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) He was present at the time of disbanding.
12. In what way was he prevented from returning to his Command? How do you know?
13. What effort did he make to return to his Command and how do you know?
14. Was applicant captured as a prisoner? No. If so, when and where? Not with. In what prison was he held? and when released?

Sworn to and subscribed before me, this the

10 day of Sept 191 2

Wm. Henry & Simpson Pickens Ordinary.

of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.

Personally before me comes C. B. Love who on oath says that they are free holders residing in said County and we know C. B. Love 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.)
David Applicant owns no property of any kind.

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov

1901 (State it fully by items.)

2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to the 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?

or was it made to obtain a pension?

Sworn to and subscribed before me, this the

10 day of Sept 191 2

Wm. Henry & Simpson Pickens Ordinary.

of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.

I, Wm. Henry & Simpson Pickens Ordinary of said County, certify that I know the applicant C. B. Love is the person who represents himself to be and resides in said County. That I also know C. B. Love is a free holder, 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 shows that C. B. Love and wife value for tax in 1908 \$ 1000 for 1909 \$ 1000 for 1910 \$ 1000 Sworn under my hand and official seal of office this 10 day of Sept 191 2

- 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.

In what prison was he held? and when released?

Sworn to and subscribed before me, this the

10

day of

1901

Ordinary

of

Sumter

County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Sumter County.

Personally before me comes Mr. M. R. Rouse who on oath says that they are free holders residing in said County and we know Mr. R. Rouse 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 Name and value.)

Real Applicant owns no property of any kind

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov

Loucheb, Emma, Co. (M.S.)
Fulton Co. Ga.
Approved 1930

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
 Husband Was on the Pension Roll
 of Georgia.

County Fulton
 Name Mrs. Emma Lovelace
 Widow of Wm. P. Lovelace
 Company "A"
 Regiment 37th Batt. Va. Militia
 Date of Husband's Death May 15, 1830
 Date of Marriage Dec 1, 1822
 Approved R. de T. Lawrence
Pension Commissioner

Leave OK.

JOHN W. CLARK,
 Commissioner of Pensions.

6-4-30 E

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Fulton COUNTY.

I, Wm. H. Jeffries Ordinary of said County, do certify that I know Emma Lovelace the applicant for pension; that she is the person who represents herself to be, and that she is contemporarily a bona fide resident of said County since January 1st, 1920; that I also know Wm. P. Lovelace the witness as to marriage, and that both 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.

Given under my hand and official seal of office this 30 day of May, 1930
Wm. H. Jeffries Ordinary.
 (SEAL OF ORDINARY) Fulton County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that the answers you make to each of the questions asked you and the witness 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 of the county of residence.
4. Every application must be accompanied by a marriage license, if not, prove marriage, by some person, or by general reputation.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

{ State of Georgia } Personally appeared before me
 { Walton County } W.M. Sasser who on oath says
 that he was present at the
 marriage of Mr. and Mrs. W. P.
 Loveless in Meriwether County, Ga.
 on December 12th 1872

Witness

Amey A. Bowen TP
Georgia State at Large.

W.M. Sasser

Lovelace Emma, Co. 1st
Fulton Co. Ga.

Approved 1930

WIDOW'S APPLICATION

To Be Filled on Ball in Her Own Right When
 Husband Was on the Pension Roll
 of Georgia.

County *Fulton*
 Name *Mrs. Emma Lovelace*
 Widow of *Wm. P. Lovelace*
 Company *13th*
 Regiment *37th Regt. Va. Militia*
 Date of Husband's Death *May 15 1830*
 Date of Marriage *Dec 12 1872*
 Approved *R. de F. Lawrence*
Pension Commissioner

JOHN W. CLARK,
 Commissioner of Pensions.

6-4-30 E

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Fulton COUNTY.

I, *Thos H. Jeffries* Ordinary of said County, do certify that I
 know Mrs. *Emma Lovelace*, the applicant for pension; that she is the person
 she represents herself to be, and that she is continuously a bona fide resident of said County since
 January 1st, 1920; that I also know *Mrs. Laura King*, the witness as to
 marriage, and that both the foregoing were duly sworn by me before signing the respective affi-
 davits, 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 *3rd* day of *May*, 19*30*

(SEAL OF ORDINARY)

Thos H. Jeffries Ordinary,
Fulton County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You 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 of the county of residence.
4. Only widows who are married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

{ State of Georgia } Personally appeared before me
 { Walton County } W.M. Sasser who on oath says
 that he was present at the
 marriage of Mr. and Mrs. W. P.
 Lovelace in Meriwether County, Ga.
 on December 12th 1872

Witness

Jerry K. Brown M.P.
Georgia State at Large.

W.M. Sasser

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia.

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. Emma C. Lovelace of said County,
 who, after having been duly sworn, says that she is the widow of William Perry Lovelace
 to whom, in the County of Fulton State of Georgia she was married on
 the 12 day of Dec. 1872, and that she remained his wife, and resided with him to
 the date of his death in May 25, 1930 and that she has not since his death remarried: at
 the time of his death he was a resident of Fulton County, in said State
 of Georgia, and he was on the Pension Roll of the State and paid a pension of \$ 75.00
 in Fulton County on May 19 30, on account of being a soldier in Company
 Regiment (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia and she
 has, continuously, resided there since 8th day of Dec. 1854

Sworn to and subscribed before me, this the
29 day of May 1930

Arthur R. Warbut Ordinary
 of Fulton County.

(SEAL OF THE ORDINARY.)

Emma C. Lovelace
 (Applicant)
3221 Peachtree Rd.
Atlanta, Ga.
Y. Mrs. F. N. Salter

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. Vance King known to be
 a responsible and truthful person, residing in said County, who after having been duly sworn, says
 that of deponent's own personal knowledge, Mrs. Emma C. Lovelace, who made the foregoing
 affidavit, is the lawful widow of William Perry Lovelace who died in Fulton
 County in said State of Georgia on the 25 day of May, 1930,
 and that she has not since remarried; that she became the wife of William Perry Lovelace
 on the 12 day of Dec. 1872; that she and he had resided together as husband
 and wife, continuously, since 12 day of Dec. 1872, and that William Perry
Lovelace 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
29 day of May 1930

Arthur R. Warbut Ordinary
 of Fulton County.

(SEAL OF ORDINARY)

Mrs. Vance King
 1.

that of dependent's own personal knowledge, Mrs. ~~XXXXXXXXXXXX~~, who made the foregoing affidavit, is the lawful widow of William Perry Lovelace who died in Fulton County in said State of Georgia on the 25 day of May, 1930, and that she has not since remarried; that she became the wife of William Perry Lovelace on the 12 day of Dec., 1872; that she and he had resided together as husband and wife, continuously, since 12 day of Dec., 1872, and that William Perry Lovelace 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

29 day of May, 1930

Arthur R. Harbut Ordinary
of Fulton County.

(SEAL OF ORDINARY)

Miss James Lang

1927 (3)
 Approved
Loveless, Wm. P.
Milton Co.
 CONFEDERATE
 SOLDIER'S APPLICATION

Under Act of 1916--As Amended by Act of
 1919, and Constitutional Amendment
 of 1920.

County Fulton
 Name Wm. P. Loveless
 Company B
 Regiment 3rd Battalion La. Militia
 Approved John R. Clark
11th July 27

Witness claiming State
Group of Not Believed
Date of Enlistment
Not given
 Commissioner of Pensions.

Not found in subha
Rolls of Georgia Co.
3-27-27 E

STATE OF GEORGIA
 COUNTY
 Ordinary's Certificate

I, John P. Loveless, Ordinary of said County, certify that I know
Wm. P. Loveless the applicant for pension; that he is the person
 he represents himself to be, and that he has been continuously a bona fide resident citizen of said
 State since January 1st, 1920; that I also know Wm. P. Loveless the witness, who
 swears to the service; that both of them are now residents of said County and were duly sworn by
 me before signing the foregoing affidavit, and they are truthful and trustworthy and their
 statements are entitled to full faith and credit.

Sworn under my hand and official seal of office, this 24th day of May, 1927
John P. Loveless Ordinary
 of Fulton County

SEAL OF ORDINARY
 INSTRUCTIONS:

Get a true and correct copy of the foregoing certificate and the witness in the following words:
 "I, John P. Loveless, Ordinary of said County, certify that I know Wm. P. Loveless the applicant for pension;
 that he is the person he represents himself to be, and that he has been continuously a bona fide resident citizen of said
 State since January 1st, 1920; that I also know Wm. P. Loveless the witness, who swears to the service; that both of them
 are now residents of said County and were duly sworn by me before signing the foregoing affidavit, and they are truthful and trustworthy and their
 statements are entitled to full faith and credit."

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

STATE OF GEORGIA

COUNTY

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

1. What is your name and where do you reside? (Give County and Post Office) *Wm. P. Younce, 855 West End Ave., Atlanta, Ga.*
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? *Lifelong Resident.*
3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State from 1861 to 1865? *Enlisted in Militia July 3, 1864. — Co. B.*
4. When and where, and in what Company and Regiment did you enlist? (State the arm and class of service, and give name of Colonel and Captain.) *December, Fall of 1864, at Marietta, Ga. Private. Co. W. M. Cobb and Capt. S. S.ledge.*
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge.) *Apr. 1865.*
6. When and where was your Company and Regiment surrendered or discharged from the Service? *Shiloh and at West Point, Ga. 1865.*
7. Were you personally present with your Command when it was surrendered or discharged? *Yes.*
8. If you were not actually present, state specifically and clearly where you were *at West Point, Ga.*
- a. Where was your Command when you left it? *at West Point, Ga.*
- b. When did you leave the Command? *Apr. 1865.*
- c. For what cause did you leave? *Discharged.*
- d. By whose authority did you leave? *Capt. S. S.ledge.*
- e. For how long was your leave of absence granted? In what way?
- f. Why did you not return to your Command after leave expired? ✓
- g. In what way were you prevented? ✓
- h. What effort did you make to return?
- i. Were you captured by the enemy at any time? *No.*
- j. If so, when, and where? In what prison were you held and when were you released?
9. Are you drawing a pension of any amount from this State or the United States? *No.*
10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was it not allowed? *No.*

Sworn to and subscribed before me, this the

✓3 day of May, 1927

Arthur R. Martin, Ordinary
of Fulton County

Applicant.

Ordinary's Certificate

UNIV. OF GEORGIA

COUNTY.

I, Joseph Delaney, Ordinary of said County, certify that I know
Wm. E. Sullivan the applicant for pension; that he is the person
 he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said
 State since January 1st, 1920; that I also know J. H. Lucille, the witness, who
 is not a party hereto; that both of them are now residents of said County and were duly sworn by
 me before signing the foregoing affidavit, and they are truthful and trustworthy and their
 statements are entitled to full faith and credit.
 Witness my hand and official seal of office this 24th day of May, 19 27

(CASE OF ORDINARY.)

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 truly answer make to each of the questions asked you and the evidence
 you give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and
 must be certified by such Ordinary.
4. Fill out the back of the application carefully.

Questions of Witness as to Service

STATE OF GEORGIA,

COUNTY.

Sworn
T. H. Candler of said State and County is hereby presented as a witness in support of the application of *Wm. P. Loulache* for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? *T. H. Candler*
Lafayette Camp Co. 4a
2. How long and since when have you known *Wm. P. Loulache* the applicant?
All of our lives - We were born and raised in same Community
3. Where does he now reside, and since when has he been, continuously, a bona fide resident of this State, and how do you know? *Atlanta Ga. All of his life*
We were boys together and reared in the same neighborhood
4. When, where and in what Company and Regiment did *Wm. P. Loulache* enlist?
(Give date and place.) *In the fall of 1864 in Co. B 37th Battalion*
4a Militia at West Point Ga.
5. How did you obtain your information of this Service? *I was there, in same*
Company and Battalion and served with him
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) *From date of enlistment, fall*
1864 to the close of the War
7. When and where was his Command surrendered or discharged? (Give date and place)
At West Point Ga, in April 1865
8. Were you personally present when it was surrendered? *yes*
9. If not, where were you? _____ and how came you there? _____
10. Was the applicant personally present with his Command when it was surrendered? *yes*
11. If not, where was he? _____ and how came him there? _____
12. When, where and for what cause did he leave his Command? (Give date.)
Arms had surrendered
By whose authority did he leave his Command? *Officers in 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
I was there with him, and know of my own personal knowledge
13. In what way, if you know of your own knowledge, was he prevented from returning to his Command? (State clearly and specifically.) *The War was closed*
14. What effort did he make to return to his Command and how do you know this? _____
15. Was applicant captured as a prisoner? *no* If so, when and where? _____
in what prison was he held? _____ and when released? _____

Sworn to and subscribed before me, this the
_____ day of *May*, 1921.
T. H. Candler Ordinary
of _____ County

T. H. Candler
Witness.

(SEAL OF ORDINARY)

know all that you have stated to be true? If of your own knowledge, state clearly and specifically
I was there with him, and know of my own personal knowledge
13. In what way, if you know of your own knowledge, was he prevented from returning to his
Command? (State clearly and specifically.) *The War was closed*
14. What effort did he make to return to his Command and how do you know this? _____
15. Was applicant captured as a prisoner? *No* if so, when and where? _____
In what prison was he held? _____ and
when released? _____

Sworn to and subscribed before me, this the _____ day of *May*, 1927.
J. H. Conwell Ordinary
of *Greene* County
(SEAL OF ORDINARY.)

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.
1. *Thos H. Jeffries*
Wm P. Lovelace

Ordinary of said County, certify that I know
the applicant for pension; that he is the person
he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said
State since January 1st, 1920; that I also know _____ the witness who
swears to the service; that *he is* both of them are now residents of said County and *was* duly sworn by
my hand before signing the foregoing affidavit, and *he is* truthful and trustworthy and their
statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *26* day of *May*, 1927.
John H. Jeffries Ordinary
(SEAL OF 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 give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and
must be certified by such Ordinary.
4. Fill out the back of the application carefully.

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.

I, Thos H. Gaffney, Ordinary of said County, do certify that I personally know Mrs. E. B. Wickerson, the applicant, and that she is the lawful widow of Wm. P. Hovelsong, who was on the 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 25 day of May, there was due to him and unpaid his Pension of 8 dollars from the State of Georgia, and I know Mrs. E. B. Wickerson, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 5 of June, 1920

(Seal of Ordinary)

Thos H. Gaffney, Ordinary
Fulton County

Luttrell, Wm P.
SECOND QUARTER '20. 1920

Fulton County

192

Application for Pension
Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs. E. B. Wickerson
Widow of Wm. P. Hovelsong

Date of Marriage

Date of Death

May 25 1920

Approved and ordered paid.

Thos H. Gaffney

June 1 1920

Commissioner of Pensions

Ordinary: Fill out above in full and send this to the Pension Department. Do not send before you get out the money, and then submit it with your pay-roll for pensioning in the Pension Department.

(To Be Paid to His Widow)
(UNDER ACT APPROVED OCTOBER 3, 1891)

Personally before me, the Ordinary of said County, comes Mrs. Emma B. Howell
of said County, who after being duly sworn, on oath says that she is the widow of _____

and that said Pensioner was on the Pension Roll of Quleton County
and was paid a Pension of Seventy five (\$75⁰⁰) Dollars
from said County for one year, 1928, and that the said Pensioner died in Quleton
County on the 25 day of May, 1934

Applicant further swears that she married the said Wm. G. Lowbese
on the _____ day of _____, 18____, in _____ County and
State of _____, 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 sum of \$one half of 100
due and unpaid be paid to her.

Sworn to and subscribed before me this 5 day of June, 1930
William R. [Signature] Ordinary } Emma C. Lovelace (S.)
Fulton County
 (Seal of Ordinary)

STATE OF GEORGIA, Fulton County.

Personally before me comes Mrs E.P. Willcoxon, who
on oath says that he knew Wm. P. Lovelace while in life
and that he knows Mrs. Emma P. Lovelace, the
above applicant; and knows that the said Wm. P. Lovelace
and Emma P. Lovelace were in the form of law married in the County
of Jefferson in the year of 1884.

The _____ day of _____, 19____, and that they were residing together as husband and wife at the time of his death on the _____ day of _____, 19____, and that she is his dependent widow.

Sworn to and subscribed before me this 45 day of May, 1930
James B. Vincent Ordinary } *Wm. B. B. McIlwain*
Fulton County }
 (Seal of Ordinary)

INSTRUCTIONS

[illegible]

[illegible]

1926
Gouett, Billie W. (Mrs)
Approved for 4 Quarter
Fullon Co
WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
 Husband Was on the Pension Roll
 of Georgia.

County Fullon
 Name Billie W. Gouett
 Widow of R. O. Gouett
 Company A
 Regiment Co Cadets B Co 9
 Date of Husband's Death Aug 15 1926
 Date of Marriage Nov 6 1879
 Approved John W. Coland
21 Oct 26.

C. M. Johnston
 Commissioner of Pensions.

9-15-26 E✓

Ordinary's Certificate

STATE OF GEORGIA.

Fullon COUNTY.

I, Thos H. Gouett Ordinary of said County, do certify that I know Billie W. Gouett the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know Harold Gouett, the witness as to marriage, and that both 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.

(Given under my hand and official seal of office this 13 day of Sept 192 6
 (SEAL OF ORDINARY) X Thos H. Gouett Ordinary,
Fullon County

Instructions.

1. Before any questions are answered the Ordinary and the witness in the following words: "You solemnly swear that you will true answers make to each the questions asked you this evidence."
2. A true and correct copy of this application and the answers thereto are to be made and filed in the office of the Ordinary of the County of residence.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Attach certified copies of your papers to prove January 1st, 1920, are entitled to pension, by some person, or by general reputation.
5. The Ordinary and the witness must use the Blue Application Book and make a proper full term of the bond's service—because Pensioners made to proof of service and were not required to do so.

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 Robert O. Lovett

and Lillie Q. Alexander

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 5th day of November 1899

Daniel Pittman Ordinary L.S.

I hereby certify that Robert O. Lovett

and Lillie Q. Alexander

were joined together in the HOLY BANS OF MATRIMONY

on the 6th day of Nov. 1899, by me Joseph E. Martin

State of Georgia,
Fulton County.

S. S.

ORDINARY'S OFFICE

ATLANTA, GA., Sept. 11th 1900

I, Arthur E. 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

Robert O. Lovett

and Lillie Q. Alexander

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 E. Marbut
Clerk Court of Ordinary.

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When Husband Was of Georgia.

County Fulton
Name Lillie Q. Alexander
Widow of R. O. Lovett
Company A
Regiment Co. Cadets 1st 1900
Date of Husband's Death 15 1900
Date of Marriage Nov 6 1899
Approved John W. Toland
21 Oct 26.

Commissioner of Pensions.

9-15-26

Ordinary's Certificate

STATE OF GEORGIA,
Fulton COUNTY.

I, Thos H. Joffnes Ordinary of said County, do certify that I know Mrs. Lillie Q. Alexander, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know Heard numerous, the witness as to marriage, and that both 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.

Given under my hand and official seal of office this 13 day of Sept 1920
(SEAL OF ORDINARY) Thos H. Joffnes Ordinary,
Marbut County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You 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 of the County of residence.
4. Only widows who are married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service--because Disabled Pensioners made no proof of service and were not required to do so.

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be Used by the Widow of a Disabled Soldier Pensioner.)

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. Lillie A. Lovett of said County, who, after having been duly sworn, says that she is the widow of R. O. Lovett to whom, in the County of Fulton State of Georgia she was married on the 6 day of Nov 1874, and that she remained his wife, and resided with him to the date of his death in Aug 15 1926 and that she has not since his death remarried; at the time of his death he was a resident of Fulton County, in said State of Georgia, and he was on the _____ Pension Roll of the State and paid a pension of \$ _____ in _____ County for 19 _____ (per annum), on account of being a soldier in Company A Regiment 4th Cal. Inf. (Volunteers or State Militia). That she is now a bona fide resident citizen of said State of Ga and she has, continuously, resided there since _____ day of the year 1906.

Sworn to and subscribed before me, this the

11 day of Sept, 1926

William R. Warburton Ordinary
of Fulton County.

Mrs. Lillie A. Lovett
(Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes H. Summers known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Lillie A. Lovett, who made the foregoing affidavit, is the lawful widow of R. O. Lovett who died in Fulton County in said State of Ga on the 15 day of Aug, 1926 and that she has not since remarried; that she became the wife of as he do of to; that she and he had resided together as husband and wife, continuously, since to the date of his death day of 10 and that he was the same man who was on the pension roll of said State from _____ County _____ when he died.

Sworn to and subscribed before me, this the

11 day of Sept, 1926

William R. Warburton Ordinary
of Fulton County.

H. Summers

(SEAL OF ORDINARY)

affidavit, is the lawful widow of R. O. Lovett who died in Fulton
County in said State of Ga on the 15 day of Aug, 1926
and that she has not since remarried; ~~that she became the wife of~~
~~the~~ ~~day of~~ ~~19~~; that she and he had resided together as husband
and wife, continuously, since to day date of his death
was the same man who was on the pension roll of said State from
County when he died.

Sworn to and subscribed before me, this the

11 day of Sept, 1926
William R. Lyall Ordinary Grand Juror
of Fulton County.

(SEAL OF ORDINARY)

County, DeKalb Co.
Sanction &
12th Jan 1871.

**Confederate
Soldier's Application**

UNDER ACT 1810.

A. C. Smith
County *DeKalb Co.*

Name _____
Company *A. B. & Co.*

Regiment _____

Approved _____

J. W. LINTHUM
Commissioner of Finance

CHIEF OF BUREAU, STATE PRISON, ATLANTA

11/2/71

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Fulton County.

Robert C. Rogers of said State and County is hereby presented as a witness in support of the application of Robert C. Rogers 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?
Robert C. Rogers, Attorney at Law
2. How long and since when have you known Robert C. Rogers the applicant?
Since 1864 in February 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? Atlanta Ga
4. When, where and in what Company and Regiment did Robert C. Rogers enlist during war from 1861 to 1865? (Give date and place) Co. A, 8th Ga. Cavalry, from the Military Institute in 1864 in May 1864
5. How did you obtain your information of this service?
I was a member of Co. B, 1st Cavalry Battalion
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) From the Surrender at May 20 - 1865
7. When and where was his Command surrendered or discharged (give date and place)
at Augusta Ga May 20 - 1865
8. Were you personally present at the Surrender? Yes, Sir.
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? Just
11. If not where was he and how came him there?

12. When did he leave his Command? When we were discharged and disbanded Where was his Command when he left it? At Augusta Ga for what cause did he leave? Termination of service

By whose authority did he leave? His officers and how long was he granted leave? Indefinite and how do you know all that you have stated to be true? Of my own knowledge (Tell clearly and specifically)

13. In what way was he prevented from returning to his Command? He further served How do you know? I was one of them

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

15. Was applicant captured and prisoner? Yes If so, when and where? None In what prison was he held? None and when released? Was not in prison

Sworn to and subscribed before me, this 1st day of Nov 1910, Robert C. Rogers Att
John R. Wickham Ordinary,
Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes Robert C. Rogers who on oath says that they are freeholders residing in said County and we know Robert C. Rogers 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.)

Lot in Cassin Gardens & Lumber Co. \$750.00
W. C. Rogers

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.)

2. When and to whom was it sold or given to?

3. What was the price paid or stated to be paid?

4. What relation is the party to applicant?

5. What disposition was made of the proceeds of the sale?

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

Sworn to and subscribed before me, this 1st day of Nov 1910,

John R. Wickham Ordinary,
Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

John R. Wickham Ordinary of said County, certify that I know the applicant Robert C. Rogers for Pension is the person he represents himself to be and resides in said County. That I also know Robert C. Rogers the witness swearing to the service and Lucian Harris & R. H. Henry 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 faithful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of Fulton shows that Robert C. Rogers and wife value for tax in 1908 \$ 100 for 1909 \$ 100 for 1910 \$ 100

Sworn under my hand and official seal of office this 1st day of Nov 1910.

John R. Wickham Ordinary,
Fulton County.

NOTES: 1. If the applicant has received the Ordinary's seal and sworn applicant and all witnesses in the following words: "I do solemnly swear that you are the person named in this affidavit and that the evidence you give me is true and that you will not be sworn to help you out."

all that you have stated to be true: or your own knowledge (necessary and spontaneous).

I was one of the boys I was there with them. No further service

13. In what way was he prevented from returning to his Command? How do you know? I was one of them

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

15. Was applicant captured as a prisoner? No. If so, when and where? In what prison was he held? None and when released? Was not in prison.

Sworn to and subscribed before me, this 14th day of May, 1911, at Fulton, Georgia.

Robert L. Rodgers, Clerk

John R. Wrenham, Ordinary

the applicant is the person he represents himself to be and resides in said County. That I also know. Robert L. Rodgers, who are freeholders, that service and Lillian Harris & J. H. Henry 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 faithful and trustworthy and their statements are entitled to full faith and credit. That the Tax Receipts of Fulton shows that C. D. Lovett and wife value for tax is in 1908 \$100.00 for 1909 \$100.00 for 1910 \$100.00

Sworn under my hand and official seal of office this 14th day of May, 1911.

John R. Wrenham, Ordinary

Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall repeat applicant and all witnesses in the following words: "I do solemnly swear that you will give truthful answers to each question asked you and the answers you shall give shall be the truth, so help me God."

2. All answers shall be made before the Ordinary and certified by him.

3. If applicant has no property at all in his possession, the oath of self and wife, affidavit of freeholders unnecessary.

Ordinary's Certificate

STATE OF GEORGIA,

COURTY

I, Fuelton Ordinary of said County, do certify that I know Marion Applegate 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; that I also know William C. Dorsett 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; that I also know Ida Wood 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; that I also know Ida Wood 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; that I also know Ida Wood 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; that I also know Ida Wood 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; that I also know Ida Wood 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; that I also know Ida Wood 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; that I also know Ida Wood 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; that I also know Ida Wood 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; that I also know Ida Wood 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; that I also know Ida Wood 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; that I also know Ida Wood the applicant for pension. She

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton
Name Serravallo C. Dorsett
Widow of John Dorsett
Company E
Regiment 11th Va
Approved J. W. Lindsey

J. W. LINDSEY,
Commissioner of Pensions.

Printed by the State Printer, Atlanta.

10-30-1920

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: You shall give will be the truth. Do help you God, you make to each of the questions asked you and the witness

2. Additional affidavits may be attached if there is any reason for same.

3. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by

4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by

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

(SEAL)

Ida Wood day of April 1920
County

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, Thos H. Jaffee Ordinary of said County, do certify that I know Senarah C. Lovette 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 it m. Wood the witness who swears to the service of husband, that both of them are now residents of said County and and my clerk 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 10 day of July 1920

(SEAL)

Thos H. Jaffee Ordinary,
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 1919.

No. 1

County Fulton

Name Senarah C. Lovette

Widow of John Lovette

Company E

Regiment 11th Va

Approved [Signature]

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

16-30-1920

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 Senarah Chick Lovette 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? Senarah Chick Lovette, 300 Linden St. Atlanta, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? 1871
3. When, where and to whom were you married? Feb. 1, 1870, Lynchburg, Va. John Lovette.
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.) Co. E, Lynchburg Rifles 11th Va. Reg. Ficket's Division Lynchburg Va. in 1862
6. When and where did the commands of your husband surrender or discharge from the army? Somewhere in Virginia, near Richmond.
7. Was your husband personally present at the time of the surrender or discharge of this command? He was on his way home to Lynchburg. He had been acting clerk for the Medical Board of his Division.
8. If he was not present state clearly where he was?
9. Where was his command when he left?
10. For what cause did he leave his command? Was wounded in right arm and made unfit for military service and was put on detached duty in the Medical Board of his Division
11. By whose authority did he leave his command?
12. For how long was he granted leave of absence?
13. What was his physical condition when he left his command? Fair. He had been wounded
14. What effort did he make to return to his command?
15. In what way was he prevented from going back to Command? On account of his wound was kept on detached service until after surrender
16. Was he captured by the enemy at any time? No.
17. If so, when and where captured and where held as a prisoner, and when and for what cause released?
18. When and where did your first husband die? In Atlanta, May 26th, 1900
19. Were you residing together when he died? Yes.
20. If not, how long had you resided apart?
21. Are you now a widow? Yes.
22. 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

9 day of July 1920

Adelmar W. [Signature] Ordinary
of Fulton County.

(SEAL)

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes Mrs. Senorah Chick Lovette who upon oath says that she is the widow of John Lovette who was a member of Co. E, 11th Va. Reg, Pickett's Division, who served with said company and regiment from 1862 until a short while before the surrender when he was put on detached service in his Divisional/Medical Department; 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 July 9, 1920.

William R. Vincent
C C ORDINARY Fulton County, Ga.

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes HENRY W. WOOD, who upon oath says:

That he knows Mrs. Senorah Chick Lovette and knew her husband, John Lovette, deceased. That he has known the said Mrs. Senorah Chick Lovette for more than forty years and knows that she and the said John Lovette resided together continuously as man and wife from the year 1880 to the date of the death of the said John Lovette in May 1900; That the said Mrs. Senorah Chick Lovette has not remarried since the death of her husband and is now his lawful widow.

Sworn to and subscribed before me
this July, 9, 1920.

Wm. H. Davis
C C ORDINARY Fulton County, Ga.

H. W. Wood

HENRY W. WOOD, who upon oath says:
That he knows Mrs. Senorah Chick Lovette and knew her husband, John Lovette, deceased. That he has known the said Mrs. Senorah Chick Lovette for more than forty years and knows that she and the said John Lovette resided together continuously as man and wife from the year 1880 to the date of the death of the said John Lovette in May 1900; That the said Mrs. Senorah Chick Lovette has not remarried since the death of her husband and is now his lawful widow.

Sworn to and subscribed before me
this July, 9, 1920.

Wm. H. Davis
C C ORDINARY Fulton County, Ga.

Wm. H. Wood

Lorr, Wm.; F.
53^d Inf.
May 2-1862.
"About, Sick,
Richmond, Va.,
Oct. 31-1862"
Prisoner of war, Ft.
Mc Henry, Md.,
Oct-1862. Sent to
H. Monroe, Va. for
exchange - Capt. Wm.
Antietam, ---
Exchanged, Antietam
Va., Nov. 10-
1862. (no later record)
M.R.

Witness C. P.
Wind from Henry Co.

Wm. H. H. C. M. S.
Amber
Richmond, Va.
F-6330K/6-2919
See inside 12-2-18
Widow's Pension
UNDER ACT 1910
County Linton
Name William Lorr
Widow of 53^d Inf.
J. W. LINDSEY,
Commissioner of Pension.
Index Printing Co. State Printers, Atlanta, Ga.

Pension office 12-3-1918.
The record of applicant's husband show him captured at battle of Antietam,
and he was at Antietam's landing on James River Nov. 10-1862 but
was testimony to act for husband honorably to the close of the war.
J. W. Lindsey, Commissioner of Pensions.

Lower, name: J.
53d Inf.

May 2-1862.
"Absent, sick,
Richmond, Va.,
Oct. 31-1862."

Don't need mail, H.
McHenry, Ind.,
Oct - 1862. Sent to

H. Monroe, Va., for
exchange - Capt. Wm.
Conrictam, Ark.

Officially, Ark.
Land, Va., Nov. 10.
1862. (no testimony)
(M.R.)

Witness O.K.
Wm. W. Duffey

Lower, Hattie C. (Wife)

F. 53. O.K. for 1819

Widow's Pension

UNDER ACT 1910

County Henry
Name Hattie C. Lower
William Lower
Widow of H. 53d Inf.

J. W. LINDSEY,
Commissioner of Pension.
Bank Printing Co. State Printing, Atlanta, Ga.

1862-9-1918
12/17-1918

Pension office 12-3-1918.
The record of applicant's husband show him captured at battle of Atlanta, Ga.
and he was at Akin's Landing on James River Nov. 10-1862. Must submit
some testimony to act for husband honorably to the close of the war.
J. W. Lindsey, Commissioner of Pensions.

I hereby certify that I am Wm. W. Duffey, who appears to the service of William Lower & that he is
resident of Henry County, Ga. & that he is a trustee & true owner & that his estate was entitled to full
pension & credit.

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA, Henry COUNTY

Personally before me comes W. W. Duffey 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. W. Duffey - Henry Co., Ga.
2. How long and since when have you known Wm. W. Duffey (applicant)?
3. How long and since when has he continuously resided in this State? (Give date) Since I first knew her before war
4. When and to whom was she married? Wm. W. Duffey (do you know?)
5. How long and since when did you know Wm. W. Duffey her husband? While in Ga. war
6. When and where did Wm. W. Duffey the husband of applicant die? April 8, 1912 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? None
9. Were they divorced? No
10. When, where and in what Company and Regiment did Wm. W. Duffey enlist? Co. F 53d Inf.
11. Were you a member of the same Company? Yes
12. How long within your personal knowledge did he perform actual military service with his Company and Regiment? 12 months.
13. When and where did his Command surrender, and was discharged? Upper Marlboro
14. Were you personally present when it was surrendered? Yes If not where were you and how came you there?
15. Was the husband of applicant personally or not at surrender? To the 12th Co. If not where was he? At the 12th Co. or prisoner. When where and for what cause did he leave Command? (Give date) By permit from Col. of Co. F. By whose authority did he leave his Command? Col. Sumner or Stearns And how long was he granted leave? As long as needed by Duffey do you know all this? He was afterwards orderly sergeant by Col. Sumner & was then detailed to help Col. Knott & to look orderly sergeant plan.
16. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? Was with Dr. or other prisoner at Harper's Ferry
17. What effort did he make to return to his Command and how do you know this? (Of your own knowledge or how?) Did not see him any more after he went with Dr. Knott

Sworn to and subscribed before me this 9 day of July 1918 W. W. Duffey

A. E. Harris Ordinary,
County

Affidavit of Two Freeholders

STATE OF GEORGIA, _____ COUNTY

Personally before me comes _____ who, on oath says that they are freeholders of said County and that they know _____ of said County and know what property she owned on Nov. 4, 1908, and its cash value to be set out by Schedule (A) as follows:

Personal property \$
Notes and accounts due \$
Total \$

Schedule (B)

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

Personal property \$
Money, Notes and Accounts \$

Schedule (C)

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

Acres of land worth \$
Horses and Mules \$
Cows and Hogs \$
Other Property \$
Income and earnings \$
Total value of all property and effects \$

Sworn and subscribed before me this the _____ day of _____ 191____

Ordinary,

of _____ County.

Ordinary's Certificate

STATE OF GEORGIA, _____ COUNTY

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

That I also know _____ 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 _____ Returned for Tax is for 1908 for 1910 \$ _____ for 1911 \$ 500 for 1912 \$ 4450 for 1913 \$ 4150-1914

Sworn under my hand and official seal of office this _____ day of _____ 191____

SEAL _____ Ordinary, _____ 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 first January, 1876, are entitled.
4. All affidavits must be made before the 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 Questions for Applicant

STATE OF GEORGIA, _____ County

Personally before me comes _____ 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? *Mar. Nathe C. Lowe, (Atlanta, Ga.)*
2. How long and since when have you been a continuing resident of the State of Georgia? *Since her birth, 1866, excepting time spent to William Lowe at Griffin, Ga.*
3. When, where and to whom were you married?
a. Have you married since the death of first and soldier husband? *No*
b. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army of Georgia Militia? (State the arms and class of Service) *Co. B 3rd Georgia Heavy Artillery*
c. When and where did the Commands of your husband surrender or discharge from the army?
d. Was your husband personally present at the time of the surrender or discharge of this Command? *No*
e. If he was not present state clearly where he was? *Prisoner at Harper's Ferry*
f. Where was his command when he left?
g. For what cause did he leave his Command? *Captured*
h. By whose authority did he leave his Command?
i. For how long was he granted leave of absence?
j. What was his physical condition when he left his Command?
k. What effort did he make to return to his Command? *Prisoner at close of war*
l. In what way was he prevented from going back to Command? *See above*
m. Was he captured by the enemy at any time? *Yes*
n. If so, when and where captured and where held as a prisoner, and when and for what cause released? *Prisoner at Harper's Ferry*

- o. When and where did your first husband die? *April 8, 1912, (Atlanta, Ga.)*
p. Were you residing together when he died? *Yes*
q. If not, how long had you resided apart?
r. Are you now a widow? *Yes*
s. What property of any description did you own, hold or control for your use and its cash value Nov. 4, 1908? (State name by items and where situated) *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. *August 1913 I purchased a lot and built a house - No. 1822 on Pine St. - and sold same to Mr. J. H. Smith for \$1000.00. I was compelled to sell the place on account of said mortgages. Said sale did not net a sufficient amount to pay the mortgages and I did not receive anything from the sale of this property. Said property was my own property and I did not intend to sell it.*
11. What property of any description of any value have you now? *None*
12. What are your annual earnings or income from any source and their value? *None*

13. 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 _____ day of _____ 191____
_____ Ordinary, _____ County.

Lowe, Hattie (Mng)
Fulton Co.
For Fulton County

1929

**Application for Pension
Due Deceased Pensioner**
(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Thos H. Jeffers Ordinary

For *Mrs. Hattie C. Lowe*

Date of Death *Feb. 18* 1929

Amount \$100.00

Approved and ordered paid

John W. Clark
JOHN W. CLARK,
Commissioner of Pensions.

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

006/19/29

GEORGIA }
Fulton County }

Personally appeared before the undersigned B. H. Treadwell, who on oath says that he is personally acquainted with Mrs. Hattie C. Lowe and has known her for many years; that in the spring of 1918 her husband, William Lowe, died, leaving her some life insurance money; that with this money she bought a lot in Ansley Park and built a very expensive house; that upon this property she placed three mortgages aggregating \$8,500; that the firm of W. E. Treadwell & Co., with which he has long been connected, sold the place at a sacrifice price of \$7,300, which did not pay off all of the mortgages, and that the owner, Mrs. Hattie C. Lowe, did not receive anything from the sale of the property; he also knows that she has not since had any property in her possession, use or control.

Sworn and subscribed before me this the *23* day of *Oct* 1918.

John W. Clark
Sworn to and subscribed before me
this Oct 25-1918 *Arthur R. Marbut*
cc Ordinary

GEORGIA }
Fulton County }

In Re Petition for Pension
for Mrs. Hattie C. Lowe, Widow of
William Lowe.

Personally appeared before the undersigned, a Notary Public in and for said County, Mrs. Sarah Lowe Zachry, who on oath says that she is the sister of William Lowe, deceased; that at the beginning of the Civil War her brother, William Lowe went to the front where he remained for several months, until he was captured and sent to prison at Harper's Ferry; that after several weeks imprisonment there he was exchanged and given a furlough home; that he was sick at the time and remained at home several weeks; but that as soon as he was able to return to the army, he went back again; that she does not remember to whose company or command he was sent, but does remember that he did not return home again until after the war was over. Deponent says that she herself remained at home during the entire duration of the war and knows that her brother, William Lowe, was away with the exception of the few weeks above mentioned, the entire time.

Notary Public
Mrs. Sarah Lowe Zachry

Sworn to and subscribed before me

the *19* day of *Nov* 1919.

Notary Public
Fulton County, Ga.

H. M. PATTERSON & SON

Spring Hill at Finch

ATLANTA, GA.

Sold to For Funeral Services of Mrs. William Lowe February 20, 1929.

Tenour Complete Service Including Casket	3275.00
SPECIAL DISCOUNTS FOR YR. CONSIDERATION	
Coffin and Lining	10.00
Cement Vault	40.00
Embalming	10.00
TOTAL	3275.00

State of Georgia)
County of Fulton)

I certify that the above account is true and correct.

Subscribed and sworn to before me this 26th day of February, 1929.

Notary Public.

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 R. Lee Miller, wife
H. M. Patterson, Son of said County, who, after being sworn, on oath
says that he knew Mrs. Hattie Lowe 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 18 day of Feb. 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 \$ 275.00, per sworn statements fully and completely
ITEMIZED hereto attached.

Sworn to and subscribed before me,

William A. Marshall, Ordinary
Fulton County
(Seal of Ordinary)

R. Lee Miller

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos. H. Jeffries, Ordinary of said County, do certify
that I personally know R. Lee Miller, wife H. M. Patterson, Son, 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. Hattie Lowe 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 Two Hundred (\$ 200.00) Dollars
in said County for 1928, and I now believe said pensioner to be dead; and that the instructions at the
foot of this voucher have been carefully observed in making up this voucher and the bills which are at-
tached hereto.

Given under my hand and official seal, this 28 day of Feb., 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. (Do not use the terms: "Just, true, due, unpaid," etc.)
- "The above and foregoing account is rendered for services in the last illness (or for funeral) expenses, as the case may be) of _____ who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

Given under my hand and official seal, this

(Seal of Ordinary)

28 day of Feb., 1929
Fulton 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. (Do not use the terms: "just, true, due, unpaid," etc.)

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

3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.

4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.

5th. Return this application, and attached bills, with your final settlement, to the Pension Department.

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

GEORGIA }
Fulton County }

Personally appeared before the undersigned P. S. Etheridge, who on oath says that he is personally acquainted with Mrs. Hattie C. Lowe, and has known her for many years; that in the spring of 1913 her husband, William Lowe, died, leaving her a few thousand dollars life insurance money; that in 1913 or 1914 she bought a lot in Analey Park and built a large and expensive house on it -- No. 18 Avery Drive; that on this property she placed three mortgages, aggregating \$8,500; that these mortgages became due and were about to be foreclosed, but that she succeeded in selling the place at a sacrifice of \$7,300; that the entire transaction was handled by him, he receiving the money and paying off the claims as far as the money would go, and that he knows that Mrs. Hattie C. Lowe did not receive anything from the sale of the property; he also knows that she has not since had any property in her possession, use or control.

Paul S. Etheridge

Sworn and subscribed before me this the

26 day of October, 1918.

Quinn B. Mason
Clerk Court of Ordinary

MARRIAGE LICENSE

OF

Mrs. Lowe

AND

Miss Hattie E. Chapman

Issued October 16th 1866 191

and Recorded on Page 310 Book

A of Marriage Licenses

F. D. Dismuke Ordinary

GEORGIA }
Fulton County }

Personally appeared before the undersigned P. S. Etheridge, who on oath says that he is personally acquainted with Mrs. Hattie C. Lowe, and has known her for many years; that in the spring of 1913 her husband, William Lowe, died, leaving her a few thousand dollars life insurance money; that in 1913 or 1914 she bought a lot in Ansley Park and built a large and expensive house on it -- No. 18 Avery Drive; that on this property she placed three mortgages, aggregating \$8,500; that these mortgages became due and were about to be foreclosed, but that she succeeded in selling the place at a sacrifice of \$7,300; that the entire transaction was handled by him, he receiving the money and paying off the claims as far as the money would go, and that he knows that Mrs. Hattie C. Lowe did not receive anything from the sale of the property; he also knows that she has not since had any property in her possession, use or control.

Paul A. Etheridge

Sworn and subscribed before me this the

26 day of October, 1918.

David B. Mason
Clerk Court of Ordinary

MARRIAGE LICENSE

OF

Mr Lowe

AND

Miss Hattie C. Chapman

Issued October 16th 1918

and Recorded on Page 310 Book

A

of Marriage Licenses

F. D. Disimile

Ordinary

David O. Mason
Clerk Court of Ordinary

1875 & 1876 ED., ATLANTA, GA. 48

MARRIAGE LICENSE
STATE OF GEORGIA, COUNTY OF SPALDING

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

Mr. Lowe You are hereby authorized to join
and *Miss Bettie E. Chapman*
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 herein of the fact and date of the Marriage.
Given under my hand and seal this 16th day of
October 1866 *F. D. Diemulke* Ordinary (L.S.)

STATE OF GEORGIA **CERTIFICATE** COUNTY OF SPALDING
I Certify that *Mr. Lowe* and *Miss Bettie E. Chapman*
were joined in Matrimony by me this 16th day of October *1866*
Recorded *1866* 191 *Mr. A. Rogers, M. G.*
Ordinary

No. 121

State of Georgia, SPALDING County.

ORDINARY'S OFFICE.

I, J.A. Drawry, Ordinary and ex-officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of the marriage license of Wm. Lowe and Miss Hattie E. Chapman

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record.

In Testimony whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the 27th day of July, 1918.

J. A. Drawry
Ordinary and ex-officio C. C. O.

No. _____

STATE OF GEORGIA,
SPALDING
COUNTY OF ORDINARY.

July Term, 1918.

Copy of the
Marriage License of
Wm. Lowe and
Miss Hattie E. Chapman

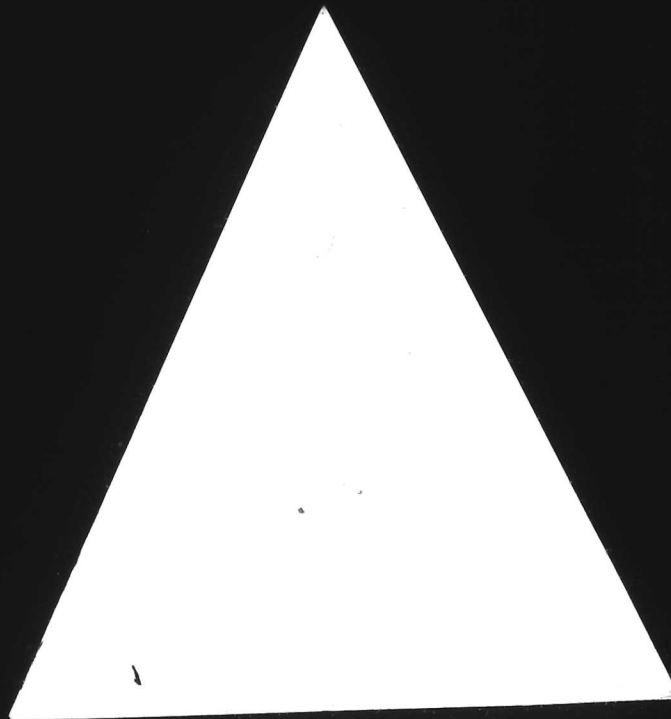
Filed in office _____ 1918
Recorded _____ 1918
Subscribed _____, page 570
J. A. Drawry
Ordinary

The State Printing Co., Atlanta, Ga.

Ordinary and ex-officio C. C. O.

Page A, page 510

The Mills Printing Co. Chicago, Ill.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I,

herby 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 _____, 1908.

[L.S.]

Executed in the presence of

To Those Heretofore Paid.

(From Thurman Co - 1702)
1908.

No. *134*

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1908.

PAID TO

Mrs. *S. P. Lowe*

OF

Guthrie ^{*Minister*} County,

Widow of *G. D.*

Co. *Liberty* ^{*1st*} Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1908

AND HANDRED TO

ap

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

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 the 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 _____ 1905.

[L. S.]

Executed in presence of _____

To Those Herebefore Paid.

Save, Sarah P. (mo)
Fulton Co
From Mrs. W. H. Co. (mo)
1903.

No. 134

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. S. P. Lowe

OF

Fulton Co County,

Widow of *J. D.*

Co. 1st Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1903

AND REMITTED TO

John W. Lindsey

1903

1903

1905.

No. 128

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. J. J. Lowe

OF

Fulton County,

Widow of *J. D. Lowe*

Co. 1st Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1905

AND REMITTED TO

John W. Lindsey

1905

1905

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of FultonS. P. Lowewho, 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 1839 That she is the Widow ofJ. D. Lowe who was a soldier in Company of the Gibson's Bat. Artillery Regt.Volunteers that he enlisted in said regiment on or about the month of May1862, and served in the Army up to April 1865 That he diedon the 30 day of May 1877Long trouble

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 an Indigent pension as a resident of Minwatha County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me,

this 22nd day of June 1904Mrs. S. P. Lowe

Post-Office

State of Georgia,

Fulton

County.

John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. S. P. Lowe who made the above affidavit andam 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 24day of May 1899Given under my official signature and seal, this 22nd day of June 1904John R. WilkinsonOrdinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of FultonM. P. Lowewho, 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 ofJ. D. Lowe who was a soldier in Company of the Gibson's Bat. Artillery Regt.

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

1862, and served in the Army up to May 1865 That he died onthe 30 day of May 1877

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 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 22nd day of JAN 2 1905S. P. Lowe

Post-Office

Atlanta

State of Georgia,

Fulton

County.

John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. S. P. Lowe who made the above affidavit andam 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 lifeday of 18Given under my official signature and seal, this 22nd day of JAN 2 1905John R. WilkinsonOrdinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES Mrs.

S. P. Lowe

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 all life. That she is the Widow of J. D. Lowe who was a soldier in Company of the Wilsons Bat. Regiment of Artillery Volunteers, that he enlisted in said regiment on or about the month of April 1862, and served in the Army up to April 1865. That he died on the 18 day of April 1877.

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 1867.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1900, and now apply for the pension provided by law for the year ending December 31, 1900.

Sworn to and subscribed before me this JAN 1 day of 1906,
J. P. Williams Ordinary.

Post Office

State of Georgia,
County of Fulton

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

day of all life

Given under my official signature and seal, this JAN 1 day of 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.

S. P. Lowe

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 J. D. Lowe who was a soldier in Company of the Wilsons Bat. Regiment of Artillery Volunteers, that he enlisted in said regiment on or about the month of April 1862, and served in the Army up to April 1865. That he died on the 18 day of April 1877.

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 1867.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1900, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this JAN 2 day of 1907,
J. P. Williams Ordinary.

Post Office

State of Georgia,
County of Fulton

I, J. P. Williams Ordinary of said County, certify that I am well acquainted with Mrs. S. P. Lowe, 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 1839.
Given under my official signature and seal, this JAN 2 day of 1907.

Official
Seal

Ordinary of

Fulton County.

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

Sworn to and subscribed before me

this day of JAN 1 1906

John P. Lawrence Ordinary

Post Office

State of Georgia,

Fulton

County

I, John P. Lawrence Ordinary of said County, certify that I am well acquainted with Mrs. J. P. Lawrence, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of all life

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

Official Seal

Ordinary of

Fulton

County

NOTE--All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

Sworn to and subscribed before me

this day of JAN 2 1907

John P. Lawrence Ordinary

Post Office

State of Georgia,

Fulton

County

I, John P. Lawrence Ordinary of said County, certify that I am well acquainted with Mrs. J. P. Lawrence, 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 29

Given under my official signature and seal, this 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.

No. 142

Photo & Davies Co., Printers, Atlanta.

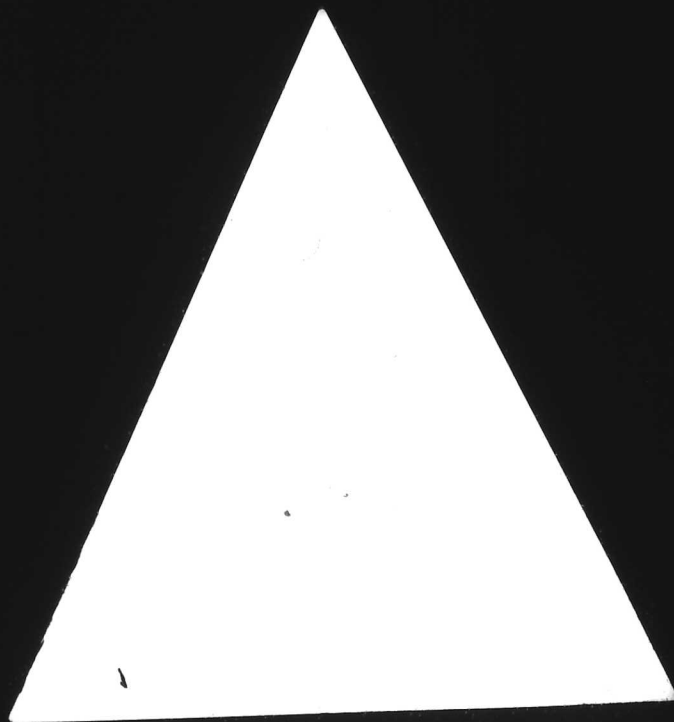
Georgia, Meriwether County.

I, the undersigned do certify that Mrs. S. P. Lawrence now of the County Fulton is the same person who as widow J. P. Lawrence Adjutant pensioner was on the pension rolls of this county, and drew a pension of twenty dollars for 1902, and the bearer is same

Given under my hand and official seal of office Dec 20 1902

[SEAL]

H. J. Kainster Ordinary [L. S.]



Pardon office
Oct 4 - 1910

This man had
been taken from
such a ~~place~~
abuse from his
country - as most
an honorable acc.
a century for him
to the end of the
could not have
built up - by himself
any honor and
off at the end of the
war - ~~he~~
army left Atlanta
Oct 18, 1864 - ~~he~~
March 18, 1865
then the day was
when his arm was
open to end of the
war.

J. W. Lindsey
Com. of Prison

Confederate
U.S. 1911

No
B-62 (C.C.C.)

Confederate
Soldier's Application.

✓ UNDER ACT 1910.

County Fulton
Name Francis Roman
Company B
Regiments 8th Ga Cavalry
Approved [Signature]

J. W. LINDSEY
Com. of Prison
CHAS. F. BYRD, State Printer, Atlanta.

4296
11/17/1911

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Franklin County, Franklin 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). Franklin
2. How long and since when have you been a continuous resident citizen of this State? All his life
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes, 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) May 1862, Co. B, 8th Georgia Cavalry
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) From May 1862 to April 1868
6. When and where was your Company and Regiment surrendered or discharged from the Service? In April 1868, Virginia
7. Were you actually present with your Command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were I was in Georgia in Hamilton County
- a. Where was your Command when you left it? Virginia
- b. When did you leave the Command? In March 1868
- c. For what cause did you leave? Detached to get up horses
- d. By whose authority did you leave? Col. commanding the Regiment
- e. For how long was your leave granted? In what way? 60 days, Detach
- f. Why did you not return to your Command after leave expired? Was cut off by the
- g. In what way were you prevented? Was cut off
- h. What effort did you make to return? Reported to the Col. commanding
- i. Were you captured during the war? No
- j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value) 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? Officer's salary as a pensioner of the Government
13. Are you drawing a pension of any amount from this State or the United States? Yes
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 30th day of July 1910, at Marcellus, Anderson Co. Ordinary, Franklin County.

Pension of
Oct 1910

This man had
such a pension
before from the
Government as
was not
at the end of the
war of 1861-65
but of 1862-68
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QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

DeKalb County.

Amos B. Brown of said State and County is hereby presented as a witness in support of the application of *F. B. Brown* 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? *Amos B. Brown, resides in Marietta, Georgia*
2. How long and since when have you known *F. B. Brown* the applicant? *Since the early part of the year 1862*
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? *He resides in Atlanta, Ga. has resided there ever since 1868*
4. When, where and in what Company and Regiment did *F. B. Brown* enlist during war from 1861 to 1865? (Give date and place) *Company B, 8 Georgia Cavalry*
How did you obtain your information of this Service? *By direct order from him in said Regiment, Company B*
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) *From May 1862 to April 1865*
7. When and where was his Command surrendered or discharged (give date and place) *In Virginia in April 1865*
8. Were you personally present at the surrender? *No*
9. If not, where were you and how came you there? *Agent with the 8th Georgia Cavalry to look after supplies for the Army, by the Commanding General*
10. Was the applicant personally present with his Command at surrender? *I think not*
11. If not where was he and how came him there? *He has been prominently absent to get up horses for the Army*
12. When did he leave his Command? *March 1865* Where was his Command when he left it? *in Virginia* for what cause did he leave? *to get up horses* By whose authority did he leave? *The Commanding General* and how long was he granted leave? *Eight days* How do you know all that you have stated to be true? *If of your own knowledge (Tell clearly and specifically) I saw him when he was absent as above and know of it*
13. In what way was he prevented from returning to his Command? *Out of the Army* How do you know? *He was the property of the Government and was not to be released*
14. What effort did he make to return to his Command and how do you know? *He was not released but he knew the army was then marching through Georgia*
15. Was applicant captured as a prisoner? *No* If so, when and where? In what prison was he held? and when released?

Sworn to and subscribed before me, this *1st* day of *August*, 1910
J. B. Maxwell Ordinary.
of *DeKalb* County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

DeKalb County.

Personally before me comes *Amos B. Brown* 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 use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.)

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.

1908? (State it fully by items.)

2. When and to whom was it sold or given to?
 3. What was the price paid or stated to be paid?
 4. What relation is the party to applicant?
 5. What disposition was made of the proceeds of the sale?
 6. Was the disposition of this property made in good faith and full value?
- or was it made to obtain a pension?
Sworn to and subscribed before me, this *1st* day of *Aug*, 1910
J. B. Maxwell Ordinary.
of *DeKalb* County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

DeKalb County.

Amos B. Brown Ordinary of said County, certify that I know the applicant *F. B. Brown* for Pension is the person he represents himself to be and resides in said County. That I also know *Amos B. Brown* the witness swearing to the service and *Amos B. Brown* 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 *Amos B. Brown* shows that *Amos B. Brown* and wife value for tax is in 1908 \$ *100* for 1909 \$ *100* for 1910 \$ *100*

Sworn under my hand and official seal of office this *1st* day of *Aug*, 1910
J. B. Maxwell Ordinary.
of *DeKalb* County.

- NOTE 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 Free holders unnecessary.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Franklin 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? (Franklin County and Post-office).....

2. How long and since when have you been a continuous resident citizen of this State?.....

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?

4. When and where, and in what Company and Regiment did you enlist? (Give the name and date of Service).....

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge).....

6. Why and where was your Company and Regiment surrendered or discharged from the Service?.....

7. Were you actually present with your Command when it was surrendered or discharged?.....

8. If you were not actually present, state specifically and clearly where you were.....

9. Where was your Command when you left it?.....

10. When did you leave the Command?.....

11. For what cause did you leave?.....

12. By whose authority did you leave?.....

13. For how long was your leave granted? In what way?.....

14. Why did you not return to your Command after leave expired?.....

15. In what way were you prevented?.....

16. What effort did you make to return?.....

17. Were you captured during the war?.....

18. If so, when, and where? In what prison were you held and when were you released?.....

19. 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).....

20. 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?.....

21. What property 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).....

22. What annual or monthly income or earnings of yourself and wife and the source derived here from?.....

23. Are you drawing a pension of any amount from this State or the United States?.....

24. Have you ever applied for the Georgia Pension and had it refused and for what cause it was not allowed?.....

25. Sworn to and subscribed before me, this the..... day of..... 1911.....

..... Notary Public in and for the State of Georgia.....

..... County.....

Confederate
Soldier's Application.

UNDER ACT 1910.

County Franklin

Name J. H. Harrison

Company B

Regiment 9th Ga. Inf.

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. STEEL, STATE PRINTER, ATLANTA.

Received by Frank B. Harrison Co.

No. 1911

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Decatur County.

A. B. Bower Jr of said State and County is hereby presented as a witness in support of the application of W. C. Bowman 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? A. B. Bower Jr
Reside in Cambridge Ga

2. How long and since when have you known W. C. Bowman the applicant?
Ever since the year 1862

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Atlanta Georgia Ever since the close of the war. I have both seen him and corresponded

4. When, where and in what Company and Regiment did W. C. Bowman enlist during war from 1861 to 1865? (Give date and place) The Georgia Cavalry Regiment in Virginia

5. How did you obtain your information of this Service? I was Captain of a Company in that Regiment and saw him there

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Until the summer of 1864

7. When and where was his Command surrendered or discharged (give date and place) Part of Regiment surrendered in Virginia and Part in Georgia

8. Were you personally present at the Surrender? No

9. If not, where were you and how came you there? I was at Fredonia, Ke on details service to protect that Point

10. Was the applicant personally present with his Command at surrender? No

11. If not where was he and how came him there? He had been sent by the Command of the Regiment in Virginia with others to get horses

12. When did he leave his Command About February 1865 Where was his Command when he left it? In Virginia for what cause did he leave? He was ordered by his Commander

By whose authority did he leave the Commanding Officer of the Regiment and how long was he granted leave? Thirty days or more How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) Being Captain in the Regiment I knew him and others being sent to Virginia for horses

13. In what way was he prevented from returning to his Command? Part of his Regiment was sent to Georgia and he was ordered to stay there

14. What effort did he make to return to his Command and how do you know? I heard that he had returned to Georgia by the Commanding Officer

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

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

Sworn to and subscribed before me, this the _____ day of _____ 1911

A. B. Bower Jr Ordinary.

of Decatur County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

_____ County.

Personally before me comes _____ who on oath says that they are freeholders residing in said County and we know the applicant for pension and we know the property that is now in the possession and control of himself and wife and of its cash value to wit: (Make List by items and value.)

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.)

2. When and to whom was it sold or given to?

3. What was the price paid or stated to be paid?

4. What relation is the party to applicant?

5. What disposition was made of the proceeds of the sale?

6. Was the disposition of this property made in good faith and full value?

or was it made to obtain a pension?

Sworn to and subscribed before me, this the _____ day of _____ 1911

_____ Ordinary.

of _____ County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

_____ County.

I, _____ Ordinary of said County, certify that I know the applicant _____ for Pension is the person he represents himself to be and resides in said County. That I also know _____ the witness swearing to the service and _____ 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 _____ shows that _____ and wife value for tax is in 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____

Sworn under my hand and official seal of office this _____ day of _____ 1911

_____ Ordinary.

of _____ County.

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

14. What effort did he make to return to his Command and how do you know?
Commended him to the care of the Commandant of the Georgia Penitentiary

15. Was applicant captured as a prisoner? *No* If so, when and where?
 In what prison was he held? _____ and when released? _____

Sworn to and subscribed before me, this the *11* day of *June*, 1911.
J. S. Maxwell Ordinary
 of *DeKalb* County.

they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of _____ shows that _____ and wife value for tax is in 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____

Sworn under my hand and official seal of office this _____ day of _____ 1911
 Ordinary
 of _____ County.

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

B. B. BOWER, Sec'y and Treas.

BYRON BOWER, Sec'y and Treas.

THE BAINBRIDGE FARM CO.

(INCORPORATED)

CORNER BROUGHTON AND WEST STREETS

BAINBRIDGE, GEORGIA

June 11/1911
 Hon. J. W. Lacey, Comr. of Penitentiary, Atlanta, Ga.
 near Mr. H. C. Bowman requests me to be a witness in his Pension Application. I have answered the questions to the best of my recollection as to dates & other details. But I remember distinctly that Mr. Bowman served in our Regiment for several years faithfully to the end of the war and was then conceded a brave reliable and faithful soldier until the surrender without a blot upon his record. I wrote this as a matter of justice to him and in view of the long lapse of time. With high regards yours truly *B. Bower*

H. E. W. PALMER, Chairman
 CLIFFORD L. ANDERSON, Vice-Chairman
 S. B. TURMAN
 SHELBY SMITH
 TULL C. WATERS, Secretary

Commissioners of Roads and Revenues

Fulton County, Georgia

Office

LUTHER I. ROSSER, County Attorney
 HUBERT L. CULBERSON, County Treasurer
 HENRY M. WOOD, Clerk
 and Ex-Officio County Auditor

Atlanta, Ga.

Personally appeared before me, _____, the undersigned, sworn and that J. C. Lacey is not possessed of any real estate or personal property whatsoever.

J. M. Wood

Subscribed and sworn to before me this _____ day of _____ 1911.

James B. Palmer
 County Public Auditor, Fulton Co., Ga.

Maxcellus M. Anderson
Allen C. Ordway
Fulton Co., Ga.

I hereby certify to the Chairman of the above named as being good this statement entitled to full faith and credit
Maxcellus M. Anderson
also

NAME **Lewman Frank C.** YEAR **1911** COUNTY **Fulton**

WHEN AND WHERE BORN? **Resident of Georgia all of life!
Does not state when born.**

EMERGED WHEN AND WHERE? **May 1862, does not state where.**

NAME

COMPANY AND REGIMENT? **Co. B, 8th Georgia Cavalry.**

NAME OF CAPTAIN AND COLONEL? **J. B. Griffin - Colonel**

NAME

WOUNDED, WHEN AND WHERE?

ENSLAVED.

WHEN AND WHERE SURRENDERED? **Command surrendered; April 1865, Virginia.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? **March 1865, detailed to
J. B. Griffin
get horses by authority of Col/ Commanding
the Regiment, was cut off by the enemy from
the Command.**

DIED, WHEN AND WHERE?

BURIED,

WITNESSES. **Byron B. Bower SR. - Same Command.** **No data.**

DIED, WHEN AND WHERE?

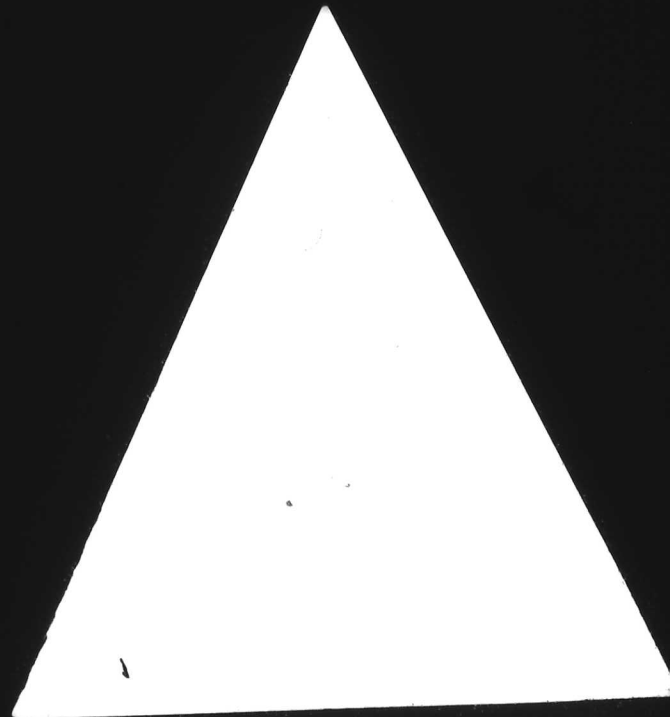
get across by swimming or fell swimming
the regiment, was cut off by the enemy from
the command.

CURIED,

WITNESSES.

Bryon B. Dover SR. - Same Command.

No data.



Lowrance James M.
Fulton County

No. _____

INDENT PENSION.

1903.

see ledger to
Lowrance
Name *James M. Lowrance*
County *Fulton*

Co. _____ Regt. _____

Approved _____ 1903.

6/19/03
JOHN W. LINDSEY,
Commissioner of Prisons.

WARRANT HANDED TO _____

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

Wm. W. Harrison, State Printer, Atlanta.

7/7.8/03

STATE OF GEORGIA.

POWER OF ATTORNEY.

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 _____, 1903.

Executed in the presence of _____

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

at _____ by _____ day of _____, 1903.

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

Executed in the presence of _____

INDIDENT PENSION.

903.

James M. Sullivan

County Sullivan

On B. 4th

Approved _____

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

Original will with Name of _____

and the _____

1903

7/28/03

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

I, James M. Sullivan of said State and County, desiring

avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn

true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post-office)
James M. Sullivan - Sullivan Co. - Sullivan Pa
2. How long and since when have you been a resident of this State? About 25 years
3. When and where were you born? 1845 - March - Sullivan Co. Pa
4. When and where and in what company and regiment did you enlist or serve?
1862 - April - 1865 - 42nd Pa. Co. 12th
5. How long did you remain in such company and regiment? April 26th 1865 - when Genl Johnson surrendered -
6. When and where was your company and regiment surrendered and discharged? April 26 - 1865 - Genl Joseph C. Johnson at Gettysburg Pa
7. Were you present with your company and regiment when it was surrendered? Yes
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was present
9. How much can you earn (gross) per annum by your own exertions or labor? About \$3.00
10. What has been your occupation since 1865? Hammering - making nails
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"? I am grounded
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? Old and infirm weak - broke down in health and able to stand disease of lungs & heart & kidneys.
13. What property, real and personal, or income, do you possess, and its gross value? Nothing
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? None
15. In what County did you reside during those years, and what property did you then return for taxation? In Sullivan Co. - No taxes
16. How were you supported during the years 1899, 1900, 1901 and 1902? By my labor and wife's help
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About \$100 - all of it with wife
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? Hammering - just little crops and what I could
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? One family as yet - wife
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? None
22. How many applications have you ever made and under what class? None

Sworn to and subscribed before me this the 30th day of July, 1903.
John W. Lindsey Ordinary,
County.

Every Question MUST be Answered

QUESTIONS FOR WITNESS.

STATE OF North Carolina,
Catawba COUNTY.

Chas. L. Phillips of said State and County, having been presented as a witness in support of the application of Jos. M. Lawrence 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? Chas. L. Phillips
Clinton, Catawba North Carolina
2. Are you acquainted with Jos. M. Lawrence, the applicant; if so, how long have you known him? Since 1862
3. Where does he reside, and how long and since when has he been a resident of this State? In Brittan County Ga, Sept 1862 soon after then
4. When, where and in what company and regiment did he enlist, and how do you know? July 2nd 1862 - Catawba Co. N.C. Co. B - 42nd Regt
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? 3 years or more
7. When and where was his command surrendered? April 1865 - circumstances
8. Were you present when it surrendered? Yes
9. Was applicant present? Yes - he was
10. If he was not present, where was he? He was present
 When did he leave his command? April 1865 For what cause? Surrender
 By what authority he left? Capt. J. P. Federal How do you know all of this?
He was with him all the while

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 1890, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort, if so, why?
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
19. Who composes family? What property have they? Children's age and their earning capacity?

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

Sworn to and subscribed before me, this the 19 day of May, 1903.

L. L. Phillips, Clerk Superior Court
State of N.C. Catawba Co.
notary public for said county
Subscribed and sworn to before me this 19th day of May 1903.
L. L. Phillips, Clerk Superior Court

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Fulton COUNTY.

Personally came before me A. H. Bashkin and W. T. Brown, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Jos. M. Lawrence, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

That he is suffering with a weak heart caused by a valve being diseased. It is not probable that his age and cancer should not be prohibited. It is not able to earn a living without surgery.

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

A. H. Bashkin M.D.
W. T. Brown M.D.

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Fulton COUNTY.

I, John R. Wilkinson Ordinary, in and for said County, hereby certify that the applicant Jos. M. Lawrence resides in said County, and has been a bona fide resident of this State since the 1 day of 1, 1890 and that the witnesses, viz: J. T. Brazier

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 Fulton County show that applicant returned for taxation in his name in 1899 Dollars of property, and in 1900 Dollars of property, in 1901 Dollars of property, in 1902 Dollars of property.

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

Witness my hand and seal of office, this 30th day of May, 1903.

John R. Wilkinson Ordinary,
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.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Shutlows COUNTY.

J. T. Gragan of said State and County, having been presented as a witness in support of the application of Gas M. Lawrence 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? Gas T. Gragan
2. Are you acquainted with Gas M. Lawrence, the applicant; if so, how long have you known him? Yes - about 25 years
3. Where does he reside, and how long and since when has he been a resident of this State? Shutlows County Ga - 25 years
4. When, where and in what company and regiment did he enlist, and how do you know?
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty?
7. When and where was his command surrendered?
8. Were you present when it surrendered?
9. Was applicant present?
10. If he was not present, where was he?

When did he leave his command? For what cause?

By what authority he left? How do you know all of this?

(See certificate of J. T. Phillips)

11. What property, effects or income has the applicant? (Give your means of knowledge.) None - I wish was richer for over 20 years
12. What property, effects or income did the applicant possess in 1890, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? Has never sold or made that more - all these years
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? He has not
14. What is the applicant's occupation and physical condition? Farmer - Has heart - kidney & lung disease - is old - broke down & infirm
15. Is the applicant unable to support himself by labor of any sort, if so, why? He is unable because of an attack of - kidney & lung & heart trouble
16. How was he supported during the years 1890, 1899, 1900, 1901 and 1902? By aid of his wife and children
17. What portion of his support for these four years was derived from his own labor or income? He has never worked for himself - all support has been derived from his wife and children
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 old & infirm - Has heart, lung and kidney disease - shortness of breath
19. Who composes family? What property have they? Children's age and their earning capacity? Self & wife - no children - no property

20. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this the 30th day of May 1903. J. T. Gragan Witness.
John Robinson Ordinary.

QUESTIONS FOR WITNESS.

STATE OF North Carolina

Catawba COUNTY.

H. A. Newman of said State and County, having been presented as a witness in support of the application of Gas M. Lawrence 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? H. A. Newman
2. Are you acquainted with Gas M. Lawrence, the applicant; if so, how long have you known him? Since 1862
3. Where does he reside, and how long and since when has he been a resident of this State?

4. When, where and in what company and regiment did he enlist, and how do you know? Enlisted in Co B 42 N.C. Troops in Jan 1862. I was with him
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? Until 3 years before the surrender
7. When and where was his command surrendered? near Greensboro N.C.

8. Were you present when it surrendered? Yes
9. Was applicant present? Yes
10. If he was not present, where was he? was present

When did he leave his command? For what cause?

By what authority he left? How do you know all of this?

I was orderly Sergt of Co. and called the roll

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 1890, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort, if so, why?
16. How was he supported during the years 1890, 1899, 1900, 1901 and 1902?
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
19. Who composes family? What property have they? Children's age and their earning capacity?

20. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this the 13th day of July 1903. H. A. Newman Witness.
J. T. Phillips Clerk of Court

I certify that H. A. Newman made in this case \$8 is worthy to be believed
this 13 day of July 1903 J. T. Phillips Clerk

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code 7. *He is old & feeble - Has Heart, Lung and Kidney diseases - Shortness of breath -*

19. Who composes family? What property have they? Children's age and their earning capacity? *Self & wife - no children - no property*

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

Sworn to and subscribed before me, this the *3rd* day of *May*, 1908. *J. L. Hogan* Witness.

John P. Williams Ordinary.

17. What portion of all support for some time past was derived from the 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 7.

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? *(See)*

Sworn to and subscribed before me, this the *13th* day of *July*, 1908. *H. A. Herman* Witness.

Lt. H. Philip Clark

I certify that H. A. Herman made in this case \$8 is worthy to be believed this 13 day of July 1908 Lt. H. Philip Clark

Lowrance, J. M.
Roswell Store
For *Exton* County

1926

Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Thos H. Jeffries Ordinary

For *J. M. Lowrance*

Date of Death *Apr. 22*, 1925

Amount \$ *100.00*

Approved and ordered paid

John W. Clark
JOHN W. CLARK,
32 July 26 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.

Pd ✓

Roswell, Ga. *June 1st*, 1926

M. J. M. Lowrance

IN ACCOUNT WITH

ROS WELL STORE

ACCOUNT RENDERED

TO MERCHANDISE

<i>Apr. 22</i>	<i>Cashed & pay</i>	<i>85.00</i>
	<i>note</i>	<i>12.50</i>
	<i>carriage</i>	<i>7.50</i>
	<i>hearse</i>	<i>15.00</i>
	<i>soil</i>	<i>5.00</i>
	<i>shirt & drawers</i>	<i>14.50</i>
	<i>flowers</i>	<i>30.00</i>
		<i>124.95</i>

Ys Fullon County
Personally appeared
M. E. Groover who swears that the above
bill is true and was funeral
expenses of J. M. Lowrance
sworn to & subscribed before me this
June 1 - 1926
Arthur R. Macarbut
E. B. O.

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 M. E. Groover of Roswell Store of said County, who, after being sworn, on oath says that he knew Mr. Lawrence 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 22 day of April, 1926, and that a Pension of \$50.00 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 \$124.95, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

Arthur R. Mearns 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 M. E. Groover of Roswell Store, 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 Mr. Lawrence 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 50.00 Dollars in said County for 1926, 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 22 day of April, 1926.

(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: (Do not use the terms: "Just, true, due, unpaid," etc.) "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of who died without owning sufficient property to pay this bill."
- 3rd. The Ordinary must see to it that each bill is perfectly legible 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. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.
- 6th. Return this application, and attached bills, with your final settlement to the Pension Department.
- 7th. Ordinary should see that the back of the blank, when folded, is filled out.

Roswell, Ga., June 1st 1926

M. E. Groover

IN ACCOUNT WITH

ROSSELL STORE

ACCOUNT RENDERED

TO MERCHANDISE

Apr. 22: Check & pay	85 00
Kobe	12 50
Carton work	7 50
hearse	150 00
cost	50
shirt & drawers	145
flowers	300
	<u>124 95</u>

Y. Fulton County
Personally appeared
M. E. Groover who swears that the above
bill is true and was funeral
expenses of Mr. Lawrence
sworn to and subscribed before me this
June 1st 1926
Arthur R. Mearns
R. B. O.

the same person whose name appears on the Pension Roll of County, and
was paid a Pension of Twenty (\$50.00) Dollars
in said County for 192....., and I now believe said pensioner to be dead; and that the instructions at the foot of
this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.
Given under my hand and official seal, this day of 192.....
(Seal or Ordinary) Arthur R. MacArthur 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: (Do not use the terms: "Just, true, due, unpaid," etc.)

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

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. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipt.

6th. Return this application, and attached bills, with your final settlement to the Pension Department.

7th. Ordinary should see that the back of this form, when filled, is filled out.

expenses of Mrs. J. J. MacArthur
sworn to and subscribed before me this
January 1 - 1926
Arthur R. MacArthur
S. C. O.

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the law & the regulations, and as the rules adopted by the Governor regarding the payments provided, the following suggestions are submitted.

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

2. The disability should be shown to be 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 the application is for a disease, the applicant must show that the amendments have been duly sworn to.

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

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

Lowry, John
Fullton, A.
1890

No. 2804
APPLICATION FOR ALLOWANCE.

Leg disabled.
Applicant, J. Lowry
County, Fullton
Amount, \$50
Date of Warrant, June 4
Entered on record, June 4, 1890
L. O. N. A.
TREASURER EXECUTIVE DEPARTMENT

applicant.
E. 4/92

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

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

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

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

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

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

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

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

STATE OF GEORGIA.

PERSONALLY appears John County of Newton 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 25th day of

November 1861; 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 K, of 5th Regiment

of Georgia Volunteers Sumner's Brigade; that whilst engaged in such military service, at the battle of New Hope in the State of Georgia on the 22nd day of March 1864, he was

wounded as follows: - Shot in Left Leg Ball Entered -

a boat half way between Kene and Angel friends

proctoring. Some a part of some came out.

Place Where Ball Entered is a running sore all the

time causing foot and ankle at times to in

plane & became sore: the angle is stiff and

Dependent desires to participate in the benefits of the Act approved October 24, 1888.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the Act amendatory thereof, approved December 24, 1888, and makes application for

the allowance to which he is entitled for the year thereunder ending October 26, 1889.

Sworn to and subscribed before me, this the 24th day of January, 1894.

24 day of May 1889
T. J. Caffery D.D.

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

the extent of the disability.

STATE OF GEORGIA

STATE OF GEORGIA,
County, Conasa

PERSONALLY came before me Edw. H. Reddy of the county

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

a commissioned officer in Company , of 8 Regiment of 24 Va
Volunteers, and that deponent knows 3. W. Lawrence, 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 1st Lt. George

as stated by him in said affidavit. Deponent further states that said [redacted] is a bona fide citizen of this State and resides

_____ is a bona fide citizen of this State and resides in _____ county.

Sworn to and subscribed before me this 10th day of April 1941

Day of June 1820

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

STATE OF GEORGIA,

County. }

PERSONALLY came

citizens of _____ county, in said State,
who, being duly sworn, say that they are acquainted with _____

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

Sworn to and subscribed before me, this _____
day of _____ 188 _____

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

STATE OF GEORGIA,

Hall County }

PERSONALLY comes before me *W. L. Leathum* Ordinary of said county,
K. L. Durkin and *J. W. Duncan*, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *Joe W. Lamy* and after such examination say that the applicant has been injured as follows:

Minnie Ball Thigpen left Lybia about middle third of spring 1864 followed by General Sherman which destroyed much of Left flank thereby rendering the left virtually useless without the constant use of crutch or stick and therefore substantially & essentially useless

Sworn to and subscribed before me, this _____

4 day of January 188 _____

W. L. Leathum
ORDINARY.

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

STATE OF GEORGIA,

Hall County }

I, *W. L. Leathum* Ordinary of said county,
do certify that I am well acquainted with *J. W. Lamy* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in 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 *J. W. Lamy* before whom the foregoing affidavits were made and power of attorney was signed, is a *Justice of the Peace* of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 4 day of Jan 188 _____

W. L. Leathum
Ordinary Hall County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

Know all Men by these Presents, That I, _____
of _____

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

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

day of _____ 188 _____

Executed in the presence of us: _____

(L. S.)

STATE OF GEORGIA,

Fuller County.

I, W. L. L. L. L. Ordinary of said County, do certify that I am well acquainted with James M. Lowry 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 30th day of April 1891.

W. L. L. L. L.

Ordinary Fuller County.

Lowry, James W.

1891.

Fuller Co

PAID 1891

No. 3008

Application for Allowance

FOR THE YEAR ENDING OCTOBER 31, 1891.

Leg dis
Applicant, James M. Lowry
County, Fuller
Amount, 50
Date of Warrant, Apr 30 1891
Entered on record, May 10 1891

WARRANT ISSUED TO
applicant
By, W. H. Harrison, State Printer, Albany, Ga.

714 50 10

STATE OF GEORGIA,

Fuller County.

I, W. L. L. L. L. Ordinary of said county, do certify that I am well acquainted with James M. Lowry 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 27th day of March 1892.

W. L. L. L. L.

Ordinary Fuller County.

Lowry, James W.

Fuller Co

No 2965

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name James M. Lowry
County Fuller
Disability Leg Dis
Amount, \$ 50
Entered on record March 27 1892
W. H. HARRISON,
Secretary of Penitentiary Department.
AGENT.
applicant
By, W. H. Harrison, State Printer, Albany, Ga.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fuller County.

PERSONALLY appears *James M. Lowry* 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 *Birth* 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 *Private* in Company *K*, of *56th* Regiment of *Georgia* Volunteers *Commaney*'s Brigade; that whilst engaged in such military service at the battle of *New Hope Church* in the State of *Georgia*, on the *22nd* day of *June*, 1864, he was wounded as follows: *gun shot wound of left leg rendering the same useless and essentially disabling*

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

Eight dollars, for *1890*
Sworn to and subscribed before me, this, *3rd* day of *April*, 1891.

W. L. Callahan
Notary Public in and for the State of Georgia.
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, _____ of _____ County, State of Georgia, do hereby appoint

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

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

Executed in the presence of us: _____

DIRECTION.

Send money to me as follows, by _____

to _____

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fuller County.

PERSONALLY appears *James M. Lowry* of *Fuller* 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 *25th* day of *November*, 1842; 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 *It* of *56th* Regiment of *Georgia* Volunteers *Commaney*'s Brigade; that whilst engaged in such military service at the battle of *New Hope Church* in the State of *Georgia*, on the *22nd* day of *June*, 1864, he was wounded as follows:

gun shot wound of left leg making the same and rendering the leg essentially and essentially disabling

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

Eight dollars, for *1891*
Sworn to and subscribed before me this, *22nd* day of *March*, 1892.

W. L. Callahan
Notary Public in and for the State of Georgia.
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, _____ of _____

County, in said State, do hereby appoint

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

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

Executed in the presence of us: _____

DIRECTION.

Send money to me as follows, by _____

to _____

P. O.

County, Georgia.

POWER OF ATTORNEY.
STATE OF GEORGIA, }

County, }

Know all Men by these Presents, That I _____
of _____ County, State of Georgia, do hereby appoint

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

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

Executed in the presence of us: _____

DIRECTION.

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

*Samuel James M.
Hutton Co*

1893.

*James M.
Hutton*

No. 1191

Application for Allowance

For the Year Ending October 31, 1893

Dr. J. G. Hutton
Applicant, *James M. Hutton*
County, *Hutton*

W. J. Hutton
Amount, \$ _____

W. J. Hutton
Date of Warrant, _____

W. J. Hutton
Entered on record, _____

W. J. Hutton
_____ 1893

W. J. Hutton
Warrant Number _____

W. J. Hutton

W. J. Hutton

W. J. Hutton

STATE OF GEORGIA.

For Applicants heretofore allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County, }

PERSONALLY appears James M. Lowry 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 25th day of November, 1840; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a Private in Company K, of 56th Regiment of Georgia Volunteers, Summers's Brigade; that whilst engaged in such military service at the battle of orio Hope Church in the State of Georgia, on the 22nd day of June, 1862, he was wounded as follows: gunshot wound of left leg broke my the bone and rendering said leg substantially and essentially useless.

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 _____

Eighty dollars, for 1892.

Sworn to and subscribed before me, this, the _____

20th day of March, 1893.

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

STATE OF GEORGIA, }

Fulton County, }

I, M. E. Latham, Ordinary of said County, do certify that I am well acquainted with James M. Lowry 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 20th day of March, 1893.

M. E. Latham
Ordinary Fulton County.

STATE OF GEORGIA, }

COMMISSIONER OF ALLOTMENT

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 hereunto 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.

Soldier's Pension. 1894.

Name James W. Leavy
County Fulton
Disability Disabled w/ Leg
Amount, \$ 50.
3/12

1894.

W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDRED TO

Applicant.

Geo. W. Harrison, State Printer, Atlanta.

James W. Leavy,
Fulton Co.

(For Those Already Enrolled.)

No. 84

SOLDIER'S PENSION. 1895.

Name _____
County _____
Disability _____
Amount, \$ _____

1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDRED TO

all

Geo. W. Harrison, State Printer, Atlanta.

212

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 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.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County. }

PERSONALLY appears James W. Lowry 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 25th day of November 1840; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company K, of 56th Regiment of Georgia Volunteers, Dunning's Brigade; that whilst engaged in such military service at the battle of New Hope Church in the State of Georgia, on the 22nd day of June 1864, he was wounded as follows: gun shot wound of left leg breaking the bone and rendering said leg substantially and essentially useless

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 12th day of March 1894.

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, W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with James W. Lowry the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.



M. L. Calhoun
Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County. }

PERSONALLY appears James W. Lowry 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 25th day of November 1840; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company K, of 56th Regiment of Georgia Volunteers, Dunning's Brigade; that whilst engaged in such military service at the battle of New Hope Church in the State of Georgia, on the 22nd day of June 1864, he was wounded as follows: gun shot wound of left leg breaking the bone and rendering said leg substantially and essentially useless

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 11th 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, W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with James W. Lowry the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 11th day of March 1895.



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 _____ 1896.

[L. 8.]

Executed in presence of _____

(For Those Already Enrolled.)

No. 293

SOLDIER'S PENSION.
1896.

Name James F. Lorry

County Fulton

Disability 70

Amount, \$ 50

226 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

appt

Gen. W. Harrison, State Printer, Atlanta.

W. L. Lott

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. 8.]

Executed in presence of _____

(For Those Already Enrolled.)

No. 655

INVALID
SOLDIER'S PENSION.
1897.

Name James F. Lorry

County Fulton

Disability 70

Amount, \$ 50.00

1897.

226

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

appt

Gen. W. Harrison, State Printer, Atlanta.

W. L. Lott

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears James H. Lowry 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 25th day of November 1840; 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 K, of 56th Regiment of Georgia Volunteers, Cumming's Brigade; that whilst engaged in such military service in the State of Georgia, on the 7th day of June 1864, he was wounded, injured or diseased as follows: gun shot wound of left leg breaking the bone and rendering said leg substantially and permanently useless.

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 24th, 1890. I have heretofore as a resident of Fulton County been allowed a pension of fifty dollars, for the year 1890.

Sworn to and subscribed before me, this, 26th day of May 1890. J. W. Lowry
M. L. Calhoun, Ord.

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

STATE OF GEORGIA,

Fulton County.

I, M. L. Calhoun Ordinary of said County, do certify that I am well acquainted with James H. Lowry the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1890.



M. L. Calhoun

Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears James H. Lowry 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 November 1840; 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 K, of 56th Regiment of Georgia Volunteers, Cumming's Brigade; that whilst engaged in such military service in the State of Georgia, on the 7th day of June 1864, he was wounded, injured or diseased as follows:

gun shot wound of left leg breaking the bone and rendering said leg substantially and permanently useless.

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 24th, 1890. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of fifty Dollars, for the year 1890.

Sworn to and subscribed before me, this, 24 day of July 1890. J. W. Lowry
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 James H. Lowry the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 24th day of July 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 _____ 1888.

[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 _____ 1889.

[L. S.]

Executed in presence of _____

NOT OF 14 OCT. 1882.

(For These Already Enrolled.)

No. 2252

INVALID

SOLDIER'S PENSION.

1888.

Name James M. Lowry

County Fulton

Disability Disabled leg

Amount, \$ 50.00

3/7 1888

RICHARD JOHNSON,

Commissioner of Pensions

WARRANT HANDED TO

appk

NO data

OUR SECTION 1882.

(For These Already Enrolled.)

No. 1470

INVALID

SOLDIER'S PENSION.

1889.

Name J. M. Lowry

County Fulton

Disability

Amount, \$ 50.

4/21 1889.

RICHARD JOHNSON,

Commissioner of Pensions

WARRANT HANDED TO

appk

NO data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears James M. Lowry 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 Nov 1870; 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 H, of 16th Regiment of Geo. Volunteers, Sumner's Brigade; that whilst engaged in such military service in the State of Geo., on the 22 day of June 1864, he was wounded, injured or diseased as follows:

I am shot wound in left leg, rendering same useless.

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 29th, 1898. I have heretofore under said law as a resident of Fulton county been allowed an invalid pension of Fifty Dollars, for the year 1897.

Sworn to and subscribed before me, this, 7 day of March 1898. POST-OFFICE St. Michaels

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 James M. Lowry, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 7 day of March 1898.



Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears James M. Lowry 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 Nov 1870; 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 H, of 16th Regiment of Geo. Volunteers, Sumner's Brigade; that whilst engaged in such military service in the State of Geo., on the 22 day of June 1864, he was wounded, injured or diseased as follows:

I am shot wound in left leg, rendering same useless.

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1898. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of 50 Dollars, for the year 1897.

Sworn to and subscribed before me, this, 21 day of July 1898. POST OFFICE St. Michaels

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 James M. Lowry, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 21 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 _____

COPIES SECTION 18A
(For Those Already Enrolled)

No. 529

INVALID

SOLDIER'S PENSION.

1900.

Name *J. H. Lowry*
County *Fulton*

Disability

Amount, \$ *50.00*

Warrant issued *July 5* 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

AM

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
County. }

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

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

[L. S.]

Executed in presence of _____

COPIES SECTION 18A
(For Those Already Enrolled)

No. 317

DISABLED

SOLDIER'S PENSION.

1901.

Name *Joe W. Lowry*
County *FULTON*

Disability *shot in left leg*

Amount, \$ *50.00*

1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

AM

Geo. W. Harrison, State Printer, Atlanta.

No data

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Jas. W. Lowrey 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 Nov. 1870 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 8th Regiment of Vol. Volunteers, Lowrey's Brigade; that whilst engaged in such military service in the State of Georgia, on the 22 day of June 1864, he was wounded, injured or diseased as follows:

Gun shot wound in left leg.

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 Fulton County been allowed an invalid pension of \$5.00 Dollars, for the year 1899.

Sworn to and subscribed before me, this 2 day of May 1900. } J. W. Lowrey

M. H. Hulst
Notary Public for the State of Georgia.

STATE OF GEORGIA,

Fulton County.

I, M. H. Hulst Ordinary of said County, do certify that I am well acquainted with J. W. Lowrey the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 May 1900.



M. H. Hulst
Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Jas. W. Lowrey 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 Nov. 1870; 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 8th Regiment of Vol. Volunteers, Lowrey's Brigade; that whilst engaged in such military service in the State of Georgia, on the 22 day of June 1864, he was wounded, injured or diseased as follows:

Gun shot wound in left leg.

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 \$5.00 Dollars, for the year 1900.

Sworn to and subscribed before me, this 18 day of May 1901. } J. W. Lowrey
John R. Wilkinson

John R. Wilkinson
Notary Public for the State of Georgia.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 18 day of May 1901.



John R. Wilkinson
Ordinary FULTON County.

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

by _____

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 _____

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 _____

(FOR THOSE ALREADY ENROLLLED.)

No. 60

DISABLED

SOLDIER'S PENSION

1902.

Name: J. W. Lowry

County: FULTON

Co. N Regiment 1st Reg

Disability around left leg

Amount, \$ 50.00

1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

144

One W. Harrison State Prison, Atlanta.

no data

Lowry, J. W.
Fulton County

(FOR THOSE ALREADY ENROLLLED.)

No. 139

DISABLED

SOLDIER'S PENSION

1903.

Name: J. W. Lowry

County: FULTON

Co. N Regiment 1st Reg

Disability around left leg

Amount, \$ 50.00

1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

144

One W. Harrison State Prison, Atlanta.

no data

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ATTORNEY PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

FULTON

County.

Personally appears J W Lowry 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 Nov 1846; 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 56th Regiment of Georgia Volunteers, Cummings's Brigade; that whilst engaged in such military service in the State of Georgia, on the 22 day of June 1864, he was wounded, injured or diseased as follows:

Wounded in left leg

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 Twenty Dollars, for the year 1901.

Sworn to and subscribed before me, this the J W Lowry day of JAN 13 1902. Post-office.

John P. Wilkinson
Notary.—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 J W Lowry the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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

County.

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

NOTARY OF FULTON



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears J W Lowry 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 Nov 1846; 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 56th Regiment of Georgia Volunteers, Cummings's Brigade; that whilst engaged in such military service in the State of Georgia, on the 22 day of June 1864, he was wounded, injured or diseased as follows:

Wounded in left leg

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 the John P. Wilkinson day of JAN 13 1903. Post-office.

John P. Wilkinson
Notary.—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 J W Lowry the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1903. John P. Wilkinson

Ordinary

County.

Notary.—Fill all blanks and of Company and Regiment.
Notary.—All vouchers and affidavits must bear date after January 1, 1903.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, *Chatham*

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. R.]

Executed in presence of _____

FORM NO. 120.

(FOR THOSE ALREADY ENROLLED.)

No. *131*

DISABLED

SOLDIER'S PENSION

1904.

Name *John W. Lindsey*

County *Chatham*

Co. *H* Regiment *56th*

Disability *blind & leg*

Amount, \$ *50.00*

Per 1 1904.

JOHN W. LINDSEY.

Commissioner of Pensions

WARRANT HANDED TO

copy

Geo. W. Harrison, State Printer, Atlanta.

no data

(FOR THOSE ALREADY ENROLLED.)

FORM NO. 120.

No. *30*

DISABLED

SOLDIER'S PENSION

1905.

Name *J. H. Lindsey*

County *Chatham*

Co. *56th* Regiment *56th*

Disability *disabled leg*

Amount, \$ *50.00*

Per 1 1905.

JOHN W. LINDSEY.

Commissioner of Pensions

WARRANT HANDED TO

copy

Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, _____

I, _____ hereby authorize

of _____

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

by _____

at _____

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

day of _____ 1905.

—[L. R.]

Executed in the presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears *J. H. Lowry* 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 *Nov* 18 *42* 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 *B*, of *56*th Regiment
of *56*th Volunteers *Engineering* Brigade; that whilst engaged
in such military service in the State of *Georgia*, on the *22* day
of *June* 186 *4*, he was wounded, injured or diseased as follows:

Wound in left leg.

Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1904. I have heretofore, under said law, as a resident of
5-0 **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. *J. H. Lowry*
Post-office *Chattahoochee*

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. H. Lowry*
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 *J. H. Lowry* 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 *Nov* 18 *42* 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 *B*, of *56*th Regiment
of *56*th Volunteers *Engineering* Brigade; that whilst engaged
in such military service in the State of *Georgia*, on the *22* day
of *June* 186 *4*, he was wounded, injured or diseased as follows:

Disabled leg, New Hope Church, Ga.

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
5-0 **Fulton.** County, been allowed an invalid pension of
Dollars, for the year 1904.

Sworn to and subscribed before me, this the
day of *JAN 2* 1905. *J. H. Lowry*
Post-office *Chattahoochee*

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. H. Lowry*
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 *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.

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 _____

FOR THOSE ALREADY ENROLLED.)

K-56 No. 137

DISABLED

SOLDIER'S PENSION
1906.

Name

J. W. Lavery

County

Fulton

Co.

Regiment

1st

Disability

by disabled

Amount, \$

50.00

1/10 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

5/14

no date

Lavery, J. W.
Fulton Co

K-56 No. 19

DISABLED

SOLDIER'S PENSION
1907.

Name

J. W. Lavery

County

Fulton

Co.

Regiment

1st

Disability

by disabled

Amount, \$

50.00

1/10 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

5/14

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY. }

I, _____ hereby authorize

of _____

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

by _____

at _____

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

day of _____ 1907.

[L. S.]

Executed in presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears J. H. Lowry 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 25 day of November 1864; 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 12, of 25th Regiment of Ca. Volunteers Cummins's Brigade; that whilst engaged in such military service in the State of Ca. on the 28 day of June 1864, he was wounded, injured or diseased as follows:

Disabled leg. New Hope Church, Ga.

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 June 1906.

J. W. Lowry

Post Office 267 Edgewood St

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 J. H. Lowry the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 June 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 J. H. Lowry 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 25 day of November 1864; that he enlisted in the military service of the Confederate States (or of the State of Ca.) during the war between the States, and served as a Private in Company 12, of 25th Regiment of Ca. Volunteers Cummins's Brigade; that whilst engaged in such military service in the State of Ca. on the 28 day of June 1864, he was wounded, injured or diseased as follows:

Disabled leg. New Hope Church, Ga.

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 June 1907.

J. H. Lowry

John R. Wilkinson

Postoffice Atlanta Ga.

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 J. H. Lowry the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 June 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.

I, John H. Henry, Ordinary of said County,
do certify that I am well acquainted with J. H. Henry,
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 _____, 1907.

Ordinary Fulton County.

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

do certify that I am well acquainted with J. H. Henry,
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 _____, 1907.

Ordinary Fulton County.

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

Maimed Soldiers.

Voucher No. 2897

Amount \$ 20

Paid to J. H. Henry
For Leg amputated

June 11 1890

Included in Warrant No. _____

issued to Treasurer.

WARRANT CLERK

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

affidavit

No. 2897

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga., June 24 1890

Mr. *J. M. J. Gentry* 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

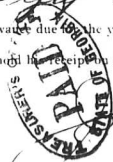
Leg disabled.
He is entitled to receive the sum of *Fifty & 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890

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

By the Governor,

H. H. Harrison

CLERK EXECUTIVE DEPARTMENT.



GOVERNOR.

\$50

RECEIVED OF STATE TREASURER, R. V. HARDEMAN,

Fifty & 00/100
per above voucher, this *4*

Dollars,

of *June* 1890
J. W. Lowrey

\$50

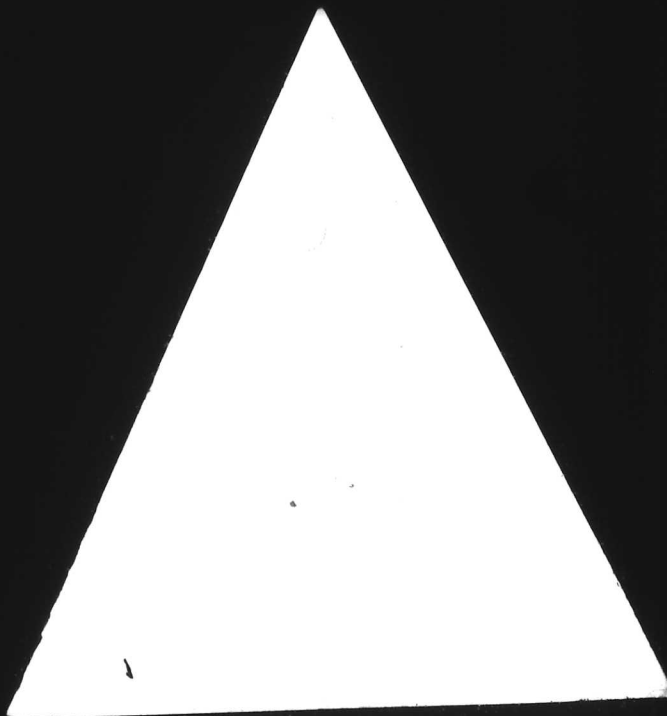
RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

Fifty & 00 of
per above voucher, this *4*

Dollars,

of *June* 189*0*

J. W. Laurry



Junior. A. J. a
Fulton Co.
No. *Coff*

**INDIGENT PENSION,
1902.**

Name *A. J. Simsford*
County *Fulton*
Co. *No. 36. 600* Reg'm't
Approved _____ 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/9-1902

POWER OF ATTORNEY.
STATE OF GEORGIA,
COUNTY }

I, _____
do hereby authorize
to receive and receipt for the pension allowed, and request that he print same to _____
Witness my hand and seal, this _____ day of _____ 1902. [L. S.]
Executed in presence of _____

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 _____ at _____ by _____ day of _____ 1902.

Witness my hand and seal, this _____ day of _____ 1902.

Executed in presence of _____ [L. S.]

INDIGENT PENSION, 1902.

Name A. G. Ginnard
County Fulton
Reg't Co. 36th
Approved _____ 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.
9/9-1902

Questions for Applicant.

STATE OF GEORGIA,

County,

I, A. G. Ginnard of said State and County, desiring to avail myself of the Pension Act (Section 1234, Code), hereby subscribe the 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 post office)
A. G. Ginnard - Fulton - Atlanta Ga
2. How long and since when have you been a resident of this State?
Since 1860
3. When and where were you born? 1825 - Smith Co Virginia
4. When and where and in what company and regiment did you enlist of service?
1862 - De Kalb Co Ga Co. A 36th Ga Regiment
5. How long did you remain in such company and regiment? Until Summer of 1864 - captured near Atlanta Ga
Discharged from prison after 1 month of confinement
6. When and where was your company and regiment surrendered and discharged? Don't know
was in prison at Ft. Delaware
7. Were you present with your company and regiment when it was surrendered? No says a Prisoner
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? Was in prison - at Ft. Delaware
9. How much can you earn (gross) per annum by your own exertions or labor? nothing
10. What has been your occupation since 1865? Farming when able
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"? all three
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? about 7 years
lost 47 years old - could not work - totally blind - been totally blind about 4 years
13. What property, real or personal, or income, do you possess, and its gross value? none
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900 and 1901, 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 - sum of \$1000
16. How were you supported during the years 1899, 1900 and 1901? By my own work
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? nothing
18. What was your employment during 1896, 1899 and 1901? What pay did you receive in each year?
No employment - Blind - no work
19. Have you a family? If so, who compose such family? Give their means of support? Have they a homestead? wife - she has no means of support
she is supported by her children
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? once
22. How many applications have you ever made and under what class? once
A. G. Ginnard
1865

Sworn to and subscribed before me this _____ day of _____ 1902.

John W. Harrison Ordinary,
of Fulton County.

Applicant.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

DeKalb COUNTY

H. T. Pater of said State and County, having been presented as a witness in support of the application of *A. J. Lumsford* for pension under Section 1234, Code, and after being duly sworn the answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *Allen T. Pater. I reside in DeKalb County, Ga.*
2. Are you acquainted with *A. J. Lumsford* the applicant; if so, how long have you known him? *Yes. Have known him since the summer of 1862.*
3. Where does he reside, and how long and since when has he been a resident of this State? *He resides in Fulton Co. Ga. & he has been a resident since 1862.*
4. When, where and in what company and regiment did he enlist, and how do you know? *He enlisted in Co. F, 36th Regt. Heavy Artillery, serving with him at same time.*
5. Were you a member of the same company and regiment? *Yes.*
6. How long did he perform regular military duty? *About 12 months in the Company.*
7. When and where was his command surrendered? *At Fort Mifflin Pa. April 26, 1865.*
8. Were you present when it surrendered? *I was.*
9. Was applicant present? *No.*
10. If he was not present, where was he? *He was a prisoner in the enemy's hands.* When did he leave his command? *Summer of 1864.* For what cause? *He was captured by enemy.* If he was not present, where was he? *He was taken prisoner near Atlanta.* How do you know all of this? *I was in same Company with him and the fact of his capture was well known to me & well remembered.*
11. What property, effects or income has the applicant? (Give your means of knowledge?) *He has nothing & has been intimately associated with him from 1862 to 1865.*
12. What property, effects or income did the applicant possess in 1866, 1867, 1868, 1869, 1900 and 1901, and what disposition, if any, did he make of same? *He owned no property during the years mentioned & has not disposed of any.*
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? *None at all.*
14. What is the applicant's occupation and physical condition? *He was a farmer. Has no occupation now. Has been blind about four years and can do any thing at all - Can get about out of house.*
15. Is the applicant unable to support himself by labor of any sort, if so, why? *Yes, he is very old, about 76 yrs of age, and blind as above stated. He is unable to support himself by any labor for these reasons.*
16. How was he supported during the years 1866, 1867, 1868, 1869, 1900 and 1901? *By his children all of whom are of age & now have families to support.*
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 1234, Code? *He is blind, very old and physically unable to work or do business. He is afflicted with rheumatism in his feet & could not support himself even if he could see.*
19. What interest have you in the recovery of a pension by this applicant? *None whatever.*

Sworn to and subscribed before me, this the 29th day of Aug 1902.

Ordinary

Witness

W. M. Rogsdace Ordinary in and for DeKalb County. *A. J. Pater* is known to me and from his statements are worthy of full credit and belief. *W. M. Rogsdace* Aug 29th 1902.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY

Personally came before me *A. H. Baskin* and *W. M. Rogsdace* both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully *A. J. Lumsford* applicant for pension under Section 1234, Code, and after such personal examination say that his precise physical condition is as follows:

That he is old, feeble and from general disability. He is totally blind. These infirmities cause total disability and are permanent.

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

Sworn to and subscribed before me, this the 4th day of Sept 1902.

John R. Wilkinson Ordinary

A. H. Baskin M.D.
W. M. Rogsdace M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY

I, *John R. Wilkinson* Ordinary in and for said County, hereby certify that the applicant *A. J. Lumsford* resides in said County, and has been a bona fide resident of this State since the day of 1865 and that the witnesses, viz:

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

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

I further certify that the tax digest of County show that applicant returned for taxation in his name in 1869 Dollars of property, and in 1900 Dollars of property.

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

Witness my hand and seal of office, this 4th day of Sept 1902.

John R. Wilkinson 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.

are worthy of full credit and belief, and the same
 to be given by hand and seal of office
 Aug 29th 1912.
Wm. Rogers
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA.

Bullock County. }
 I, *A. J. Lunsford* hereby authorize

N. R. Watkins

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

Witness my hand and seal, this *21* day of *January*, 191*2*.

A. J. Lunsford [L. S.]

Executed in presence of

James R. Watkins
Ordinary

Lunsford, A. J.
Fulton County

CODE SECTION 154.
 (FOR THOSE ALREADY ENROLLED.)

No. *869-*

INDIGENT
 SOLDIER'S PENSION
 1903.

Name *A. J. Lunsford*
 County *Bullock*
 Co. *F* Regiment *36*

Wm
 WARRANT ISSUED

1/22 1903.

JOHN W. LINDSEY,
 Commissioner of Prisons.

WARRANT HANDED TO
H. F. Watkins

Geo. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County,

Personally appears A. J. Lumsford 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 1860; that he is 45 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 2 years in Company F, of 26th Regiment of 1st; that his physical condition is as follows: A + 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 20th day of JAN, 1903. A. J. Lumsford Ordinary.

STATE OF GEORGIA,

Fulton County,

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



John R. Wilkinson Ordinary.

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

Fulton.

County.)

I, John R. Wilkinson

Ordinary of said County,

do certify that I am well acquainted with A. J. Lunsford
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 R. Wilkinson
Ordinary

County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1903.

*Wm. S. Lindbey
Indigent
Soldier's Pension
1907
John W. Lindbey
Commissioner of Pensions
Wm. S. Lindbey
Indigent
Soldier's Pension
1907*

Lanierford, B. S.
Fulton Co

Civil Rights 1864.
(FOR THOSE ALREADY ENROLLED)

Wm. S. Lindbey, c. 1906

**INDIGENT
SOLDIER'S PENSION
1907.**

Name *B. S. Lanierford*
County *Fulton*
Co. *15* Regiment *17th Ala*

WARRANT ISSUED
8/20 1907.

JOHN W. LINDBEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wm. S. Lindbey

Gen. W. HARRISON, STATE PRINTER, ATLANTA.

No data

*Presented in presence of
John B. Lindbey
Quincy*

by _____ day of *July* 1907.
[L. S.]

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

Wm. S. Lindbey hereby endorses
Wm. S. Lindbey

STATE OF GEORGIA,
Fulton COUNTY.

POWER OF ATTORNEY.

Mr. Gingsy
 Dear Sir please pay this money
 to Mr B O Sandford
 Mrs Jackson

Sumner, B. S.
Fuller

(FOR THOSE ALREADY ENROLLED)
 Cross Register 184.
 Full No. 5104
 1870-1896

**SOLDIER'S PENSION
 1907.**

Name *B. S. Sumner*
 County *Fuller*
 Co. *B* Regiment *1st Ala*

WARBANT ISSUED
6/20 1907.

JOHN W. LINDSEY
 Commissioner of Pensions

WARRANT HANDED TO
Fuller

JOHN W. LINDSEY, ATTORNEY.

STATE OF GEORGIA.
 COUNTY, *Fuller*
 I, *John W. Lindsey*,
 hereby authorize *Mr. B. S. Sumner*
 to receive and receipt for the pension allowed, and request that he remit same to
 by *John W. Lindsey* day of *June* 1907.
 Witness my hand and seal, this *24* day of *June* 1907.
 Executed in presence of
John W. Lindsey
John W. Lindsey
John W. Lindsey

POWER OF ATTORNEY.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton COUNTY.

I, Mr. E. J. Jackson, 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 8th day of July, 1907.

[L. S.]

Executed in presence of

John W. Lindsey
Ordinary

Samuelson, B. S.
Fulton Co.

(FOR THOSE ALREADY ENROLLED)

Enrolled 5/10/07

INDIGENT
SOLDIER'S PENSION
1907.

Name John W. Lindsey
County Fulton
C. by Registrar 1/10/07

WARRANT ISSUED
5/20 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
John W. Lindsey

Gen. for Samuelson, B. S. & Co., Fulton.

No data

Miss Jackson
has in her hand this money
from B. S. & Co.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears B. S. Lumsden 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 1869; that he is 68 years old and by occupation Cabinet Maker; 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 B, of 7th Regiment of Alabama Inf; that his physical condition is as follows: Age & Poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this 5th day of July, 1907.

John W. Breckinridge Ordinary.

State of Georgia,

Fulton County.

I, John W. Breckinridge Ordinary of said County,

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

Given under my official signature and seal this 5th day of July, 1907.

John W. Breckinridge Ordinary Fulton County.



Note.—The blank spaces must be filled.
Note.—Affidavits should not be attempted before January 1st, 1907.

State of Georgia,

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

Given under my official signature and seal this 24
day of July 1907.



John Percichism
Ordinary Fulton County.

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

GEORGIA, Muscogee County.

I, the undersigned, do certify that B. S. Lumsden

now _____ Pensioner of this county, is on the Pension roll and draws
a pension of Sixty Dollars for 1907. The bearer is the same man
of G Company 17th Ala Regiment, who enlisted on 16th day of July
1864, and was discharged on the _____ day of April 1865, was granted a
pension \$ 60.00 for 1907.

Proven by R. W. Jamison Martin Brown as witnesses.

Given under my hand and official seal this

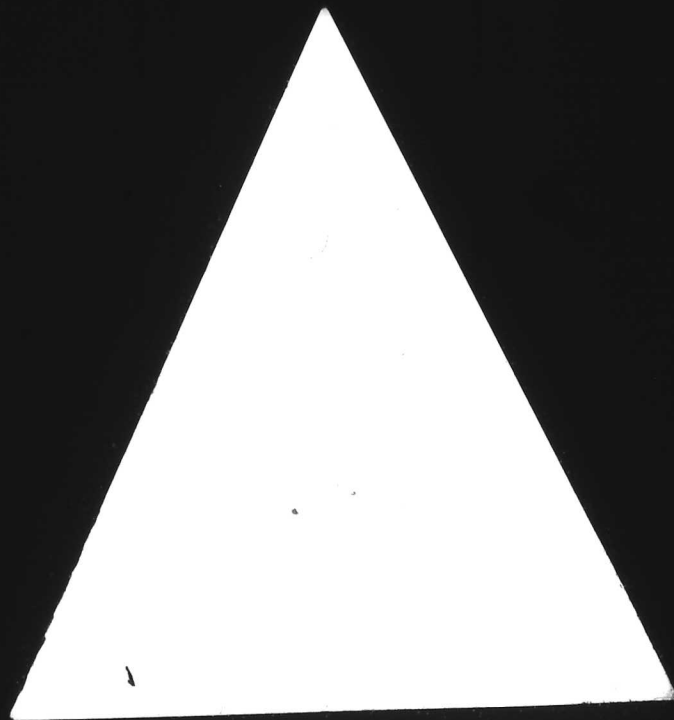
the 29th day of June 1907.

Wm. R. Jamison
Ordinary's L. S.

(SEAL)

B. S. Lumsden is also an Ordinary.
11th July Wm. R. Jamison
Ordinary.

182. hump, and is due me as ordinary.
182. hump. W. R. R. R.
W. R. R. R.



WILLIAM D. SHERMAN
Fulton County
OK for AM

Indigent

Widow's Application

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

County *Fulton*

Name *Louise Elizabeth Lybrand*

Widow of *Martin H Lybrand*

Approved

J. W. LINDSEY,
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

8/20/10

Franklin County.

Personally before me comes Sarah Estep, wife and of said County, who, after being duly sworn, on oath says, that she is the widow of John B. Estep and to whom in the County of Clay State of Mo. she was married on the 10th day of May 1866 and that she remained his wife, and resided with him to the date of his death in February 1882 and that she has not since his death remarried. At the time of his death he was a resident of The Unincorporated County, in Clay said State of Georgia, and he was on the for the first Pension Roll of the State and paid a pension of \$ 4.00 in Mo. County for 10 00 per annum, on account of being a soldier in Company A 20th Regiment 44th (Volunteers of State Militia.)

At the death of W. H. Rogers, he was in the use and possession of the following ~~property~~ of his 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.) None

Acres land.....	\$	100.00	100.00
Horses and Mules.....	\$	100.00	100.00
Hogs, Cows, etc.....	\$	100.00	100.00
Total Cash value of all property.....	\$	300.00	300.00

That she is now a bonafide resident citizen of said County of Franklin and she has so continuously resided since 1st day of Feb 1905

Sworn to and subscribed before me, this the 1st day of August 1918,
Lawrence M. Williams, C. L. Ordinary.
 of Fulton County.

.....County.

Personally before me W. T. Conley 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. Elizabeth C. Spauld who made the foregoing affidavit, is the lawful widow of M. T. Spauld who died in Bedford County in said State of Kentucky on 23 day of Feb. 1912 and that she has not since remarried. That she became the wife of M. T. Spauld on the day of 1866 and that she and he had resided together as man and wife continuously since Sept. day of 1861 and that the said M. T. Spauld was the same man who was on the pension roll of said State from Bedford County 22 1902 when he died.

Sworn to and subscribed before me, this 1st day of August 1910
Micellus N. Hanson
 Ordinary.
 of *Fulton* County.

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

Co

N

W/

Approved

J. W. LINDSEY,

Contributions of Pensioners

Thomas P. Boyd, State Printer, Atlanta

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County

Personally before me came *E. J. Stanley & M. Corley* who after being sworn on oath says, that they are freeholders of said County and that they know *Jack Cogburn* of said County and knew her said husband *not known* at his death on the day of *July* 1902 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: *None*

of the value of \$

Sworn to and subscribed before me, this the *2nd* day of *July* 1910 at *Maclum* *Maclum* County. *E. J. Stanley* *M. H. Corley* Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County

Maclum Ordinary of said County, do certify, that, I know Mrs. *Jack Cogburn* the applicant for this pension and that she is the person who represents herself to be, and that she is a bona fide continuing resident of said County and was on the *2nd* day of *July* 1910

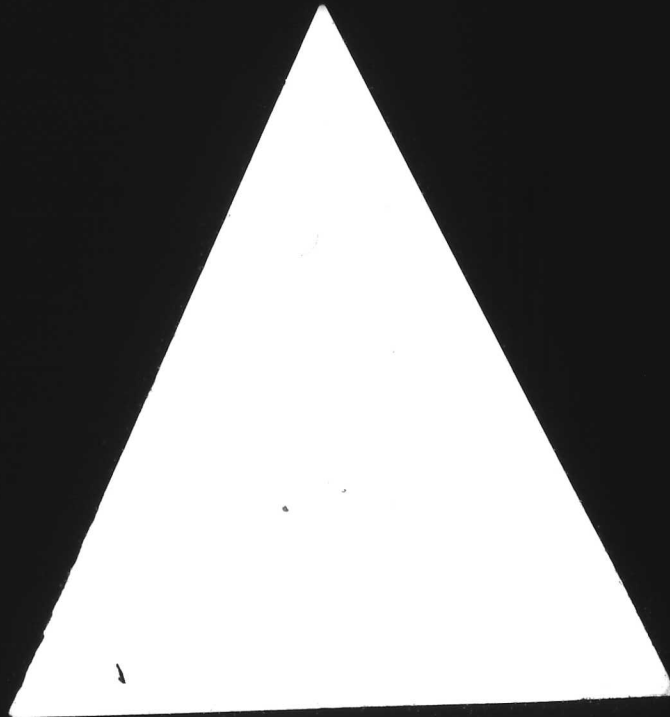
That I do know *E. J. Stanley* who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the *Books* of *Fulton* County shows that *she* returned property to the amount of \$ *None* for 1908 \$ *None* for 1909 \$ *None* for 1910 \$

Maclum under my hand and official seal of office this *4th* day of *July* 1910 (SEAL) *Maclum* Ordinary.

- 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.

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.



Lyle, C. G.
Fulton County

No.

INDIGENT PENSION,

~~1900.~~

1901

Name

C. G. Lyle

County

Fulton
Co. B - 46 - 4a

Approved

1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

9/5-1901

STATE OF GEORGIA,

Power of Attorney.

County, }

I, _____, hereby authorize
to receive and receipt for the pension allowed, and request that he remit same to _____
at _____ day of _____, 1900.
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.]

INDIGENT PENSION,

1900.

1901

Name C. G. Lyle

County Thatcher

Approved C. G. - 46 - 4m

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Geo. W. Harrison, State Printer, Albany.

9/6-1901

Questions for Applicant.

STATE OF GEORGIA,

County. }

I, C. G. Lyle 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)
C. G. Lyle South Atlanta Hallam Co Georgia
2. How long and since when have you been a resident of this State? Since 1863
3. When and where were you born? March 11, 1837 in March Hill Ga
4. When and where and in what company and regiment did you enlist of March 11, 1863 in March Hill Ga
5. How long did you remain in such company and regiment? about 3 years
6. When and where was your company and regiment surrendered and discharged? at the close of the war
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? at the close of the war
9. How much can you earn (gross) per annum by your own exertions or labor? \$200
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"? second
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? deafness and blindness in both ears since 1865
13. What property, real or personal, do you possess, and its gross value? none
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? nothing at all
15. In what County did you reside during those years, and what property did you then return for taxation? Hallam Co Ga none for taxation
16. How were you supported during the years 1868 and 1869? by my wife & family
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? \$50 or 40
18. What was your employment during 1868 and 1869? What pay did you receive in each year? no regular employment
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? yes wife and three children and no homestead
20. Are you receiving any pension? If so, what amount and for what disability? no
21. Have you ever made an application for pension before? yes
22. How many applications have you ever made and under what class? one

Sworn to and subscribed before me this 10th day of Aug, 1900, by C. G. Lyle Applicant,
of South Atlanta County, Georgia.

Every Question Must be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Harris COUNTY,

A. C. Harris of said State and County, having been presented as a witness in support of the application of C. G. Kyle 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? A. C. Harris and reside near Naushton
2. Are you acquainted with C. G. Kyle, the applicant; if so, how long have you known him? I have known him 40 years
3. Where does he reside, and how long and since when has he been a resident of this State? He resides in Fulton Co. Ga. & has been in the State 40 years
4. When, where and in what company and regiment did he enlist, and how do you know? Enlisted in March 1862 in Hamilton Co. in Co. E 4th Regt.
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? 3 years
7. When and where was his command surrendered? Proceeded with 4th army 4th Regt. near Greensboro N. C.
8. Were you present when it surrendered? I was
9. Was applicant present? He was
10. If he was not present, where was he? He was

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.) Nothing I have heard by him 9 years
12. What property, effects or income did the applicant possess in 1898, 1897, 1898 and 1899, and what disposition, if any, did he make of same? Nothing at all
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? Had no property
14. What is the applicant's occupation and physical condition? Rideller and and and and
15. Is the applicant unable to support himself by labor of any sort, if so, why? No
16. How was he supported during the years 1898 and 1899? Rideller
17. What portion of his support for these two years was derived from his own labor or income? by Rideller
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Old and infirm and has pain from his back and kidneys
19. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 14 day of Aug 1900, Augustus C. Harris Witness, J. C. Williams Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY,

Personally came before me J. C. Williams and E. Griffin M.D., both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully C. G. Kyle, applicant for pension under Section 1254, Code, and after each personal examination say that his precise physical condition is as follows:

he has lesion in the right cervical region - also chronic congestion of the kidneys & consequent pain in the back which prohibits him at times and on suspension of such physical condition is unable to labor at

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

Sworn to and subscribed before me, this the 4th day of Sept 1900, E. Griffin M.D. John R. Williamson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY,

I, John R. Williamson, Ordinary in and for said County, hereby certify that the applicant C. G. Kyle resides in said County, and has been a bona fide resident of this State since the 17th day of Dec 1897 and that the witnesses, viz: J. J. Smith

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 Fulton County show that applicant returned for taxation in his name in 1898 Dollars and in 1899 Dollars of property.

In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this 5th day of Sept 1900, John R. Williamson 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 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.

D. No. 11679 melburn answered by J. J. Smith - C. G. Kyle

I certify that A. C. Harris is a resident of Harris Co. and a man of trustworthy character and that he took the usual oath as prescribed, and answered questions 1 to 9 in his own words under my hand and seal Aug 14, 1900

J. C. Williams Ordinary, Harris County, certifies that A. C. Harris is a resident of Harris Co. and a man of trustworthy character and that he took the usual oath as prescribed, and answered questions 1 to 9 in his own words under my hand and seal Aug 14, 1900
J. C. Williams
Ordinary, Harris Co.

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

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

COPIES RETURNED.
(FOR THOSE ALREADY ENROLLED.)

No. 391

INDIGENT

SOLDIER'S PENSION

1902.

Name

Fulton.

County

Co.

Regiment

WARRANT ISSUED

1/14

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. H. HARRIS, Chief Printer, Atlanta.

COPIES RETURNED.
(FOR THOSE ALREADY ENROLLED.)

No. 307

INDIGENT

SOLDIER'S PENSION

1907.

Name

County

Co.

Regiment

WARRANT ISSUED

1/14

1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. H. HARRIS, Chief Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County,

Personally appears C. G. Lyle 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 Jan 1863; that he is 63 years old and by occupation a Gen that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 yrs in Company E 4th Regiment of La Vale; that his physical condition is as follows:

that his property consists of the following items

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

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

Sworn to and subscribed before me, this the 14 day of Jan 1902.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson, Ordinary of said County,

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

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



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,

Personally appears C. G. Lyle 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 1837; that he is 69 years old and by occupation a Gen 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 E, of 4th Regiment of La Vale; that his physical condition is as follows: Age & poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of _____ County, been allowed a pension for the year 1900.

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

John R. Wilkinson Ordinary.

State of Georgia,

_____ County.

I, John R. Wilkinson, Ordinary of said County,

do certify that I am well acquainted with C. G. Lyle the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____ 1907.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.)

Personally appears Col. Lyle 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 Birth 1834; that he is 64 years old and
by occupation a _____, that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served for the term of _____ in Company E, of 46th Regiment
of 1st Va; 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 _____
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 R. Wilkinson Ordinary of said County,
do certify that I am well acquainted with Col. Lyle
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 1903.

Ordinary.

County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.)

Personally appears Col. Lyle 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 Birth 1834; that he is _____ years old and
by occupation a _____, that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served for the term of _____ in Company E, of 46th Regiment
of 1st Va; 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.

Ordinary.

STATE OF GEORGIA,

Fulton County.)

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

day of _____

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 _____

(FOR THOSE ALREADY ENROLLED.)

No. 365

INDIGENT
SOLDIER'S PENSION
1905.

Name

County

Co.

C. G. Kyle
Fulton Co.
Regiment 40th Reg.

WARRANT ISSUED

11/8 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

C. G. Kyle
THE FRANKLIN PRINTING AND MANUFACTURING 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 _____

(FOR THOSE ALREADY ENROLLED.)

No. 384

INDIGENT
SOLDIER'S PENSION
1906.

Name

County

Co.

C. G. Kyle
Fulton Co.
Regiment 40th Reg.

WARRANT ISSUED

11/7 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

C. G. Kyle
THE FRANKLIN PRINTING AND MANUFACTURING CO., ATLANTA, GA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears B. L. Lytle 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 1837 day of 1837; that he is 47 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 3 yrs in Company C, of 46th Regiment of Geo. vol; 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, 1804, 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 10 day of Jan, 1905.

Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 10 day of Jan, 1905.

Ordinary. Fulton 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 B. L. Lytle 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 1837 day of 1837; that he is 48 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 3 yrs in Company C, of 46th Regiment of Geo. vol; 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, 1804, 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 10 day of Jan, 1906.

Ordinary.

State of Georgia,

Fulton County.

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

Given under my official signature and seal, this 10 day of Jan, 1906.

Ordinary. Fulton County.

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

STATE OF GEORGIA.

County.

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

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

Ordinary Fulton County.

Attest
my seal
here

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

State of Georgia,

County.

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

Given under my official signature and seal, this 12 day of 1906.

Ordinary Fulton County.

Attest
my seal
here

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

State of Georgia, Fulton County

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Hazel H. Lynch the applicant, and that she is the lawful widow of Hosford H. Lynch and was on the Pension Roll of said Fulton County, and was paid a Pension from One Hundred County for 1923 and at the time of his death on the 7 day of January 1923 there was due to him and unpaid his Pension of One Hundred Dollars from the State of Georgia, and I know Edna B. Davis the within witness, and he is of a truthful and trustworthy character and entitled to full credit. Given under my hand and seal this 14 day of February, 1923.

(SEAL)

Thos H. Jeffries Ordinary.
County

Lynch, H. (Mrs.) 8
Fulton Co. 190
1923

**Application for Pension Due
Deceased Soldier**
(UNDER ACT 1891)

(To be paid his Widow or Dependent Children)

BY
Mrs. Daniel H. Lynch
Widow of Hosford H. Lynch
of Fulton County
Old or New old
Date of Death Jan 7 1923

Approved and ordered paid 100 00

John W. Clark 1923
6-14-23

JOHN W. CLARK,
Commissioner of Pensions

Ordinary: Fill out above in full and send this blank to Pension Office for approval before you pay out the money, and then return it with your pay-rolls for the permanent filing in the Pension Office.

Edna B. Davis ✓

GEORGIA, _____ County.

I hereby authorize and constitute
lawful attorney to collect and receive for me in my name, the Pension due me for 1923, through
my deceased husband, _____ who was on _____
Pension Roll and paid from _____ County for 1923
Witness my hand this _____ day of _____ 1923
Attested before me _____

State of Georgia, Fulton County

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Harriet J. Lynch, the applicant, and that she is the lawful widow of Herzenwald Lynch, and was on the Fulton Pension Roll of said Fulton County, and was paid a Pension from One Hundred County for 1923, and at the time of his death on the 7 day of January, 1923, there was due to him and unpaid his Pension of One Hundred Dollars from the State of Georgia, and I know Chas B. Daniel, the within

witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 14 of April, 1923.

(SEAL)

Thos H. Jeffries
Ordinary.
Fulton County

Lynch, H. (Mrs.) to
Fulton Co. 190
1923
Application for Pension Due
Deceased Soldier
(UNDER ACT 1891)
(To be paid his Widow or Dependent Children)

BY
Harriet J. Lynch
Widow of Herzenwald Lynch
of Fulton County
Old or New old
Date of Death Jan 7 1923

Approved and ordered paid 100 00 1923
John W. Clark
6-19-23
JOHN W. CLARK,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for approval before you pay out the money, and then return the money to the Pension Office for the permanent filing in the Pension Office.

OK
pending

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 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:

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 9, 1901.

State of Georgia, Fulton County

Personally before me comes Mrs. Pamela S. Lynch, of said County, who after being duly sworn, on oath says that she is the widow of Hezekiah Lynch who was duly enrolled as a Pensioner from the County of Fulton and was paid a Pension of One Hundred Dollars from Fulton County for 1921, and that the said Hezekiah Lynch died in Fulton County, on the 7 day of Jan, 1920, and at the time of his death a Pension of \$100.00 was due him from Fulton County and unpaid for 1922. Applicant further swears that she married the said Hezekiah Lynch on the 16 day of Jan, 1888, in Fulton County and State of Ga, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 10 day of Jan, 1923.
William R. Vincent Ordinary. Mrs. Pamela S. Lynch
Fulton County. (SEAL.)

AFFIDAVIT OF WITNESS

State of Georgia, Fulton County

Personally before me comes Chas. B. Daniel, who on oath says that he knew Hezekiah Lynch while in life and that he knows Mrs. Pamela Lynch, the above applicant, that he knows that the said Hezekiah Lynch and Mrs. Pamela Lynch were in due form of law married in the County of Fulton in the State of Ga on the 16 day of Jan, 1888, and that they were residing together as husband and wife at the time of his death on the 7 day of Jan, 1920, and I know that she is his dependent widow.

Sworn to and subscribed before me this 10 day of Jan, 1923.
William R. Vincent Ordinary. Chas. B. Daniel
Fulton County. (SEAL.)

INSTRUCTIONS:

1st. This form can be used by guardian, or minor children, where there is no widow.
2nd. The Ordinary must be an attorney at law, and certified as such by the State.
3rd. The Ordinary must be a resident of the County where the deceased soldier resided, and must be a resident of the State of Georgia.
4th. The Ordinary must be a resident of the County where the deceased soldier resided, and must be a resident of the State of Georgia.
5th. The Ordinary must be a resident of the County where the deceased soldier resided, and must be a resident of the State of Georgia.
6th. The Ordinary must be a resident of the County where the deceased soldier resided, and must be a resident of the State of Georgia.
7th. The Ordinary must be a resident of the County where the deceased soldier resided, and must be a resident of the State of Georgia.
8th. The Ordinary must be a resident of the County where the deceased soldier resided, and must be a resident of the State of Georgia.
9th. The Ordinary must be a resident of the County where the deceased soldier resided, and must be a resident of the State of Georgia.
10th. The Ordinary must be a resident of the County where the deceased soldier resided, and must be a resident of the State of Georgia.

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 Mr. H. Lynch
and Miss Pamela Hicks

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 25th day of January 1868

Daniel Pittman L. S.
Ordinary.

I hereby certify that Mr. H. Lynch
and Miss Pamela Hicks
were joined together in the HOLY BANS OF MATRIMONY
on the 26th day of January 1868, by me, R. K. Porter, M.G.

State of Georgia,
Fulton County.

ORDINARY'S OFFICE

S. S.

ATLANTA, GA., January 10th 1868

I, Arthur R. Harbut Clerk Court of Ordinary of said County, hereby certify
that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

Mr. H. Lynch

and Miss Pamela Hicks

as the same appears of record in this office.

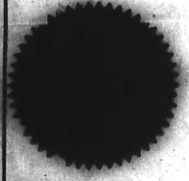
Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.

Arthur R. Harbut
Clerk Court of Ordinary.

DeKalb County, Ga.

ATLANTA, GA., 19

I, Arthur R. Harbut Clerk Court of Ordinary of said County, hereby certify
that the foregoing is a true copy of the Marriage License and Certificate of Marriage of



.....
Mr. H. Lynch
and
Miss Samella Hicks
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. Harbut
Clerk Court of Ordinary.

Lynch, Michael
Fullerton Ca
Oct 1908

Code Section 1236

No.

**INVALID
SOLDIER'S PENSION,
1908**

Name Michael Lynch
County Fullerton
Co. D. 1st Ga Regt.
Disability Disabled Leg
Amount, \$ 12.00

1908

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/29/08

STATE OF GEORGIA.

County,

I, , hereby authorize

of to receive and receive for the pension allowed and
request that he send same to by

at

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

day of 1908

Executed in the presence of

[L.S.]

POWER OF ATTORNEY.

Form No. 1.

POWER OF ATTORNEY.

Form No. 1.

STATE OF GEORGIA,

County.

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

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

Executed in the presence of _____

[L. S.]

INVALID

SOLDIER'S PENSION,

1908

Name Michael Lynch

County Multon

Co. 9th

Rank Private

Disability Broken Leg

Amount \$12.00

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

County Multon

Rank Private

Disability Broken Leg

Amount \$12.00

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

County Multon

Rank Private

Disability Broken Leg

Amount \$12.00

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

County Multon

Rank Private

Disability Broken Leg

Amount \$12.00

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

County Multon

Rank Private

Disability Broken Leg

Amount \$12.00

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

County Multon

Rank Private

Disability Broken Leg

Amount \$12.00

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

County Multon

Rank Private

Disability Broken Leg

Amount \$12.00

JOHN W. LINDSEY,

Commissioner of Pensions

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

Form No. 1.

STATE OF GEORGIA,

County.

PERSONALLY appears Michael Lynch of said Multon

County, State of Georgia, who being duly sworn, says on oath that he was born on the _____ day of _____ 1830, that he is a bona fide citizen and resident of Georgia, and has been continuously since the _____ day of _____ 1891, that he enlisted in the military service of the Confederate States (or the State of Georgia) on the _____ day of July 1861 during the war between the States, and served in Company D of 21st Regiment of Georgia Volunteers, under Gordon Brigade, and was honorably discharged on the _____ day of April 1865; that whilst engaged in such military service, and in line of duty in the State of Virginia, on the 3rd day of May 1863 he was disabled or wounded as follows: by a gunshot becoming in left leg below the knee. The ball struck the tibia or larger bone splitting it badly four inches of the bone was driven from the leg, and I pulled it out of the wound with my fingers before the surgeon operated. The bone was necrotic and by reason of the loss of so much of the larger bone the leg has been badly dis- after and almost useless. I would be- pelled to go on crutches nearly two years. The leg was so injured that pieces of the bone have worked out since the war.

Where was command surrendered? My command surrendered at Appomattox Va
Was applicant present? I was not. If not, where was he? at Milledgeville How come there? on detached service
And by whose authority? State fully: by order of the War Department being assigned to duty under General Howell Cobb and on Court Marshal service. I became Major of my
Dependent desires to participate in the benefits of Section 1250 of the Code, and the Acts amendatory thereof, and make application for the pension to which he is entitled for the year thereunder, ending October 30th, 190 _____
Sworn to and subscribed before me, this _____ day of Sept 1908 Michael Lynch
John R. Wilkinson Post Office 173 Mount Vernon Ave
Ordinary.

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

The Instructions as Set out in the Notes must be Observed.

and held that rank at the time rendered.

AFFIDAVIT FOR THREE WITNESSES.

Form No. 3.

STATE OF GEORGIA,

Fullon County.

PERSONALLY appears before me, the undersigned Ordinary in and for said County, John W. Harrison and John R. Simpson personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say under oath, that they are personally and well acquainted with Major Michael Lynch whose application is herewith presented for a pension, that he has resided in this State continuously since the

day of Sept 1898, that he served in Company D of the 21st Regiment of Georgia Brigade, and from our personal knowledge he,

while in line of duty, was injured by the service as follows: (Give full statement, and tell in your own language when, where, and how the injury happened, or the disease was contracted, and to what extent applicant is disabled from work as a direct result thereof. If he does any labor or can do any, state what.)

I knew Major Lynch before, during and since the war. He entered the Confederate service in July 1861 as Captain of Co. D. 21st Georgia Infantry, and was promoted for gallantry to rank of Major. He served under Shuford, Dole, & Co. in Jackson's Corps. He was serving in the left leg, in Battle of Chickasaw, on May 1863. I saw him after he was wounded, and he was in considerable pain about which great difficulty, by reason of the wound which shattered the bone below the knee. He has been a cripple ever since the war. I regard the wound as being substantially useless requiring to be assisted by support if he uses it much. I know of no more worthy, honorable Confederate than this applicant. Where was applicant's service? In the service, on Battle of Chickasaw, on May 1863. Were all of you present? I was not present. Was he with it? No. What was the nature of the wound? It was a severe wound from the front of the knee joint. If not, where was he? In detached service at Atlanta.

Where were you all? I was in General Bragg's army in the army near Atlanta. I saw him intimately before, during, and after the war. How do you know the facts you state to be true? I have stated fully above. Having known applicant since 1863. I know his record from that time.

We personally know above stated facts. We were with him in the army and have known him ever since. He was honorably discharged or retired from the service on day of April 1862. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1862. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this 24 day of Sept 1908, John W. Harrison Captain Co. D. 21st Georgia Infantry, and John R. Simpson Ordinary.

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

PHYSICIANS' AFFIDAVIT.

Form No. 4.

STATE OF GEORGIA,

Fullon County.

PERSONALLY comes before me, John R. Simpson Ordinary of said County, John C. Chestnut M.D. and J. R. Simpson both known to me as reputable physicians of said County, who, being severally sworn, say on oath, that they have carefully examined Michael Lynch and after such personal examination, say that the present

condition of applicant is as follows: He suffers with weakness and want of muscular power in the left leg; this manifests itself by a sudden giving away of the limb, especially while walking, and after a few hours' exercise. There is considerable thinning of the left side of pelvis, this at the portion where the hip joint is, and is deeper than the right, and that such condition is permanent. Said condition arises from the following facts: He found that there is wasting and flattening of the muscles of the left leg, especially the calf muscle; evidence of old wounds and loss of substance both in the muscles and bone; such as would be caused by gun shot wounds, and as alleged, and we have treated applicant professionally for 12 years, and his condition, as above stated,

does arise from hereditary or congenital causes, or from vicious or intemperate habits.

Sworn to and subscribed before me, this 24 day of Sept 1908, John C. Chestnut M.D. and J. R. Simpson Ordinary.

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

STATE OF GEORGIA,

Fullon County.

John R. Simpson Ordinary of said County, do certify that I am well acquainted with Michael Lynch the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents himself to be, and that he resides in this County and has been a bona fide resident since the day of Sept 1898.

I also certify that the witnesses, to-wit: John W. Harrison and John R. Simpson are persons of respectability, that their statements are worthy of full credit and belief, and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal, this 24 day of Sept 1908, John R. Simpson Ordinary, Fullon County.

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

best known applicants received from the State of Georgia, and
If not, where was he? on detached service as stated
Where were you all? I was in Trenchard's Brigade served in the army near
Applicant knew him intimately before, during and after the war.
How do you know the facts you state to be true? I have stated fully above having
known Applicant since 1857. Known him since from about 1861
We personally know above stated facts. We were with him in the army and have known him ever since.

He was honorably discharged or retired from the service on _____ day of April
1862. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1862
We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this _____ day of Sept. 1908.
John R. Wickham
Ordinary.

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

STATE OF GEORGIA,
Dallam County.
I, John R. Wickham Ordinary of said County,
do certify that I am well acquainted with Michael Dymek the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are
true, and he is disabled, as he claims, and I know he is the individual he represents himself to be, and that he
resides in this County and has been a bona fide resident since the _____ day of _____ 1895
I also certify that the witnesses, to wit: W. H. Harrison
and _____
are persons of respectability, that their statements are worthy of full
credit and belief, and that the full text of the affidavit was read to and understood by them before they signed
the same.
Given under my official signature and seal, this 24 day of Sept. 1908
John R. Wickham
Ordinary Dallam County.

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

Lynch, Pamela G.
Fulton County (Wid)

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—
 As Amended by Act of 1919.

County *Fulton*
 Name *Miss Pamela G. Lynch*
 Widow of *Hazel Andrew Lynch*
 Company *B.*
 Regiment *4. 1st Reg.*
 Approved *[Signature]*
Thomas M. Henson

J. W. LANDSEY
 Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10/27/1923

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Fulton COUNTY.

I, *Thos H. Jeffries*, Ordinary of said County, do certify that I know *Miss Pamela G. Lynch*, the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide resident of said County and was on the *10* day of *June* 19*23*.

That I also know *Edna S. Lynch*, widow of *Hazel Andrew Lynch*, and I also know

that both of the foregoing were duly sworn by and before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *16* day of *Oct* 19*23*

(SEAL)

Fulton County.

Ordinary.

NOTES: 1. Before any pension is awarded the Ordinary shall cause applicant and the witness to be sworn under oath that they will true answers make to each of the questions asked them and the witness shall prove to be true. (See Code, Sec. 4507.) These sworn are insufficient.
 2. All affidavits must be made before the Ordinary of the county of residence.
 3. Affidavits must be made before the Ordinary of the county of residence.
 4. Affidavits must be made before the Ordinary of the county of residence.
 5. Affidavits must be made before the Ordinary of the county of residence.
 6. Affidavits must be made before the Ordinary of the county of residence.
 7. Affidavits must be made before the Ordinary of the county of residence.
 8. Affidavits must be made before the Ordinary of the county of residence.
 9. Affidavits must be made before the Ordinary of the county of residence.
 10. Affidavits must be made before the Ordinary of the county of residence.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY.

I, Thos H Jeffries Ordinary of said County, do certify that I know Mrs. Chas & Daniel 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 10 day of January 1933

That I also know Chas & Daniel witness to marriage, and I also know

Chas before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 16 day of Oct 1933

SEAL

Fulton 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. All affidavits must be made before the Ordinary of the county of residence.
3. Only widows who married prior to first January, 1881, are entitled.
4. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
5. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

Widow's Application

To Be Put on Roll in Her Own Right When
Husband Was on the Regular Roll or
Put on Under Act of May 11, 1919.
As Amended by Act of 1919.

No.

County Fulton
Name Mrs. Daniel & Chas
Widow of Chas & Daniel
Company C.
Regiment 1st Regt
Approved W. H. Jeffries
Chas & Daniel

By W. H. Jeffries
Ordinary of Fulton County, Georgia.

10/27/1933

TO PAY-
1930. \$ 92
Cig. & C. Tax. \$
TOTAL

Signed, Pamela H. (Mrs.)
Fulton Co 92

For Fulton County

1932

Application for Pension
Due Deceased Pensioner
(UNDER ACT 1804)
(To pay expenses of last illness and funeral)

Thos H Jeffries Ordinary
For Mrs. Daniel & Chas
Date of Death Feb 4 1932
Amount \$ 92

Approved and ordered paid

APPROVED FOR PAYMENT
JOHN W. CLARK
Commissioner of Pensions
Veterans Service Office

PAID TO ORDINARY ON THIS CLAIM:
FUND FROM WHICH PAID \$
1930 1930 92
TOTAL 92.00

MAR 7 1935

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. Pamela J. Lynch of said County, who, after being duly sworn, says that she is the widow of Hezekiah Lynch to whom, in the County of Fulton State of Ga. she was married on the 16 day of Jan 1868, and that she remained his wife, and resided with him to the date of his death in Jan 1923 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in said State of Georgia, and he was on the Fulton Pension Roll of the State and paid a pension of \$100.00 per annum, on account of being a soldier in Company C Regiment 4th Reg. (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of Fulton and she has so continuously resided since day of April 1865

Sworn to and subscribed before me, this the

10 day of Jan 1923

Arthur R. Maguire Ordinary of Fulton County.

(SEAL)

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

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Chas. B. Daniel known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Pamela J. Lynch who made the foregoing affidavit, is the lawful widow of Hezekiah Lynch who died in Fulton County in said State of Ga. on the 16 day of Jan 1923, and that she has not since remarried. She also became the wife of He the 10 day of Jan 1923, and that she and he had resided together as man and wife continuously since April 1865, and that the he was the same man who was on the pension roll of said State Ga. from Fulton County Ga. when he died.

Sworn to and subscribed before me, this the

12 day of Jan 1923

Arthur R. Maguire Ordinary of Fulton County.

(SEAL)

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 Chas. B. Daniel of said County, who, after being sworn, on oath says that he knew Mrs. Pamela J. Lynch 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 16 day of Jan 1923 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 \$92.00 per sworn statements fully and completely ITEMIZED hereto attached, and due Harry S. Coale

Spurn to and subscribed before me,

Chas. B. Daniel Ordinary of 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 Chas. B. Daniel, 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 Pamela J. Lynch 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 Thirty (\$30.00) Dollars in said County for 1922, 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 15 day of Feb 1923

(Seal of Ordinary)

Thos. H. Jeffries Ordinary of 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.

FOR FUNERAL EXPENSES OF MRS. PALEMIA J. LYNCH

IN ACCOUNT WITH
HARRY G. POOLE
 FUNERAL DIRECTOR
 184 PRYOR STREET, S. W.
 ATLANTA, GA.
 1896 1931

Feb. 4, 1932.

To

Concrete Vault	\$50.00
Grave Fee	10.00
Paper Notices	7.00
Hearse and Services	25.00

	\$92.00

Georgia

Fulton County

I hereby certify that the above account was for the burial expenses of Mrs. Palemia J. Lynch and are just, true, correct and unpaid and that she died without sufficient funds to pay her funeral expenses.

Charles D. Pittman
 County Public

A Certificate

STATE OF GEORGIA, County of Fulton

IN RE: Expenses last illness and funeral Mrs. Palemia J. Lynch

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

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

This the 16 day of Aug, 1932.

(SEAL)

W. J. Jeffries, Ordinary

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

Received of Thomas H. Jeffries, Ordinary, \$92.00
 for the account of Palemia J. Lynch. This amount has
 not previously been paid and is now owing to me.

March 7 1935.

Harry G. Poole
By R. B. Borden

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

Mr. H. Lynch

and

Miss Pemelia Hicks

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 26th day of JANUARY 1868 ~~1932~~

Daniel Pittman

L. S.
 Ordinary

I hereby certify that

Mr. H. Lynch

and

Miss Pemelia Hicks

were joined together in the HOLY BANS OF MATRIMONY

on the 26th day of JANUARY 1868 ~~1932~~, by me. R. K. Porter, M. G.

State of Georgia,
 Fulton County.

S. S.

ORDINARY'S OFFICE

ATLANTA, GA., JANUARY 10th 1923

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

Mr. H. Lynch

and Miss Pemelia Hicks

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.

This the 16 day of Aug 1938.
(SEAL) Thomas H. Jeffries, Ordinary
(Ordinary will please complete and return immediately to A. L. Hanson, Director, Veterans Service Office, State Capitol, Atlanta, Ga.)

Received of Thomas H. Jeffries, Ordinary, \$92.00
for the account of Palemia J. Lynch. This amount has
not previously been paid and is now owing to me.

March 7 1938.

Larry C. Toole
By Broalden,

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

Mr. H. Lynch

and Miss Pamela Hicks

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.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

herby 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 _____, 1907.

[L. S.]

Executed in presence of

Done at _____, Georgia, this _____ day of _____, 1907.
(FOR THOSE ALREADY ENROLLED)

Enrollment 433
**INDIGENT
SOLDIER'S PENSION
1907.**

Name *J. W. D. Lynch*
County *Hulton*
Co. *6* Regiment *1st Ga*

WARRANT ISSUED

1/6 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

John W. D. Lynch
John W. D. Lynch, State Prison, Atlanta.

No data

FORE ATTORNEY

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton. } County.

Personally appears H. T. B. Lynch 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 1st day of June 1841; that he is 68 years old and by occupation a farmer (that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of _____ in Company C, of 2th Regiment of 44th Vol.; that his physical condition is as follows: Robust and Vigorous

that his property consists of the following items: 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 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 Fulton County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the

_____ day of _____ 1907.

John R. Wilkinson

Ordinary.

H. T. B. Lynch

State of Georgia,

_____ } County.

I, John R. Wilkinson Ordinary of said County,

do certify that I am well acquainted with H. T. B. Lynch the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1907.

John R. Wilkinson

Ordinary Fulton County.



Note.—The blank spaces must be filled.
Note.—A Deavit should not be attested before January 1st, 1907.

day of _____ 1907. *H. T. B. Lynch*
John R. Wilkinson Ordinary *March*

State of Georgia, }
 _____ County. }

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

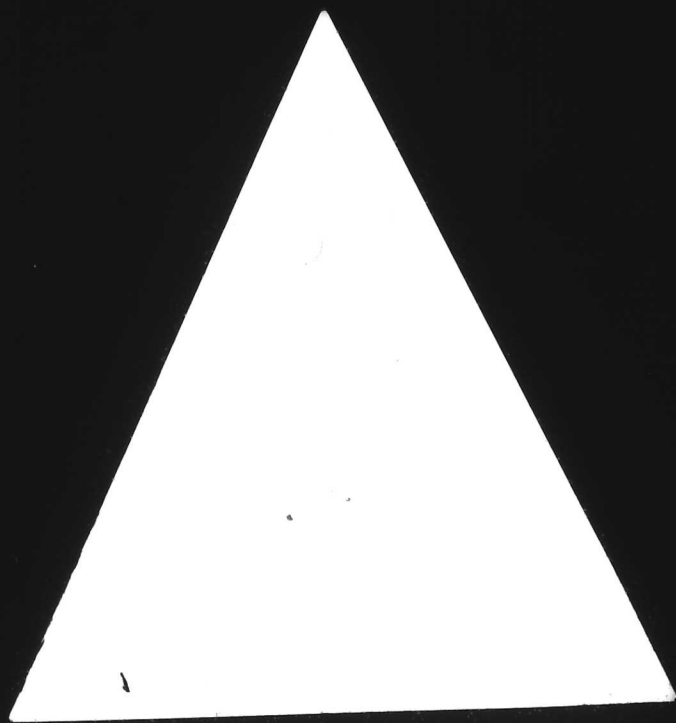


Note.—The blank spaces must be filled.
 Note.—Affidavit should not be attested before January 1st, 1907.

Georgia, Muscogee County.

I, the undersigned do certify that -----
H. T. B. Lynch ----- now of the County of *Fulton County*
 is the same person who as an *Invalid* Pensioner was on the pension
 Rolls of this County, and drew a pension of *60* dollars for, *1906* and
 that the bearer is the same man.

Given under my hand and seal of office this *2* day of *October* 1906
C. C. Bost
Wm. R. Bost Ordinary



James Jesse C.
Lynch Co.

Ok 1914

No. 7

Confederate

Soldier's Application.

UNDER ACT 1910.

County

Fulton

Name

James C. Lynch

Company

"B"

Regiment

10th S. C. Inf. C. & A.

Approved

E. R. O. 1937

W. LINDSEY
Commissioner of Finance

CHAR. W. WARD, State Printer, Atlanta.

911-913

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.

Personally before me comes

C. O. Harwell + M. E. Tilly who on oath

says that they are freeholders residing in said County and we know Jesse Cotton Lyman 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.)

One half interest in 4 1/2 acres in Land Lot No 10 of H. 14 District Fulton Co. Ga. \$1000.

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

2. When and to whom was it sold or given to?

3. What was the price paid or stated to be paid?

4. What relation is the party to applicant?

5. What disposition was made of the proceeds of the sale?

6. Was the disposition of this property made in good faith and full value?

Sworn to and subscribed before me, this the

Sept 3 day of Sept 1913 at Fulton County, Georgia.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.

I, John R. Wilkinson Ordinary of said County, certify that I know the applicant Jesse Cotton Lyman for Pension is the person he represents himself to be and resides in said County. That I also know C. O. Harwell + M. E. Tilly the witnesses swearing to the service and C. O. Harwell + M. E. Tilly 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 Jesse Cotton Lyman show that

value for tax is in 1908 \$ None for 1909 \$ 600 for 1910 \$ 1000

Sworn under my hand and official seal of office this 11 day of Sept 1913 at Fulton County, Georgia.

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 affidavit may be attempted if blank spaces are insufficient.

3. All affidavits must be made before the Ordinary and verified by him.

4. If applicant has no property at all in his possession, use or control of mil and wife, affidavit of freeholders unnecessary.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Fulton County.

Jesse Cotton Lyman 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.) Jesse Cotton Lyman Fulton County Atlanta Ga

2. How long and since when have you been a continuous resident citizen of this State? 37 years

I moved to Georgia in 1876

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Army of Confederate States

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service.) July 22nd 1861 Richmond Va. Co. D 1st S. C. Vol. Infantry

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Oct 21st 1862

6. When and where was your Company and Regiment surrendered or discharged from the Service? Approximately Va. April 9th 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. Was captured at Battle of Antietam Va. N. C. March 19th 1865. Co. G 1st S. C. Regulars

a. Where was your Command when you left it? Martinsburg, Va

b. When did you leave the Command? Oct 21 1862

c. For what cause did you leave? Appointed Cadet at S. C. M. Academy

d. By whose authority did you leave? President Davis

e. For how long was your leave granted? In what way? Honorably Discharged to go back to college

f. Why did you not return to your Command after leave expired? Discharged 1st S. C. Regulars

g. In what way were you prevented? Honorably Discharged

h. What effort did you make to return? None. Joined 1st S. C. Regulars Co. G

i. Were you captured during the war? Yes

j. If so, when, and where? In what prison were you held and when were you released? Released at Martinsville N. C. March 19th 1865. North Salisbury N. C. July 1865

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4 Nov. 1908? (Make list by items and value.)

One half interest in above land Lot No 10 District of Fulton County Ga. One thousand dollars.

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 list by items and value.)

One half interest in above land Lot No 10 District of Fulton County Ga. One thousand dollars.

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None. My own supports are

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? I have not.

Sworn to and subscribed before me, this the 11 day of Sept 1913 at Fulton County, Georgia.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF ~~MISSISSIPPI~~ *South Carolina*,
Charleston County.

Col. James Armstrong of said State and County is hereby presented
 as a witness in support of the application of *Jesse C. Lyons* 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? *James Armstrong,*
Charleston S. C.

2. How long and since, when have you known *Jesse C. Lyons* the applicant?
52 years, since 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? *Atlanta, Ga. since 1876.*

Personal Knowledge and Communication.

4. When, where and in what Company and Regiment did *J. C. Lyons* enlist during
 war from 1861 to 1865? (Give date and place)... *Co. I, 28th S.C. Inf. at Richmond, Va. July 28, 1861.*

5. How did you obtain your information of this service? *Personal Knowledge*
As Adjutant of said Regiment Lyons was

6. How long within your own personal knowledge did he perform Actual military service with
 this Company and Regiment? (give date) *15 months July 1861 to Oct 1861*

7. When and where was his Command surrendered or discharged (give date and place)
With the Army of Northern Virginia, April 9, 1865 at Appomattox

8. Were you personally present at the Surrender? *No.*

9. If not, where were you and how came you there? *Union Hospital, Washington, D.C.*
Right by challenge of April 2, 1865, Fort Sutherland Station Va.

10. Was the applicant personally present with his Command at surrender? *No.*

11. If not where was he and how came him there? *In military prison at*
Hart Island, N.Y. He was captured for the

12. When and where was his Command? *March 19, 1865, at*
Battle of Bentonville, N.C. March 19, 1865.

when he left it? *He was captured for the*
Battle of Bentonville, N.C. March 19, 1865.

13. In what way was he prevented from returning to his Command? *He was*
captured and taken to military prison.

How do you know? *Personal Knowledge as Adjutant*

14. What effort did he make to return to his Command and how do you know?
He was captured and taken to military prison.

15. Was applicant captured as a prisoner? *Yes.* If so, when and where? *March*
at Bentonville, N.C. Johnston's last battle

In what prison was he held? *Hart Island, N.Y.*
July 1865.

Sworn to and subscribed before me, this the
3 day of *Sept* 1913 *Jas. Armstrong.*

E. A. Brown County Probate Judge.
 of *Charleston* County, *South*

Carolina

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Cobb County.

I, Jas. J. Daniell, Ordinary of said County, do certify that I personally know Mrs. Kate W. Lynes, the applicant, and that she is the lawful widow of J. Colton Lynes, who was on the Pension Roll of said Fulton County, and was paid a Pension from Fulton County for 1936, and at the time of his death on the 28 day of February 1936, there was due to him and unpaid his Pension of 480.00 Dollars from the State of Georgia, and I know Mrs. Jessie M. Anderson, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 27th day of April, 1936

(Seal of Ordinary)

Jas. J. Daniell, Ordinary
Cobb County

*Copy, Jesse Cotton,
 Fulton Co.*

Fulton County

1936

Application for Pension Due Deceased Soldier (UNDER ACT 1931) (To be paid to his Widow)

BY

Mrs. Kate W. Lynes
 Widow of J. Colton Lynes
 Date of Marriage Apr. 10, 1917
 Date of Death Feb. 26, 1936

Approved and ordered paid.

R. de T. LAVERGNE
 Commissioner of Pensions
 Ordinary: Fill out above in full and send
 this blank to Pension Department for ap-
 proval before you pay out the money.

FILED
 APR 29 1936
 VETERAN SERVICE OFFICE
 A. L. HENSON, Director

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, C. O. B. B. County.

Personally before me, the Ordinary of said County, comes Mrs. Kate W. Lynes of said County, who after being duly sworn, on oath says that she is the widow of General J. Colton Lynes and that said Pensioner was on the Pension Roll of Fulton County and was paid a Pension of Thirty (\$ 30.00) Dollars from said County for the month of February 1936, and that said Pensioner died in Cobb County on the 26th day of February, 1936. Applicant further swears that she married the said J. Colton Lynes on the 10th day of April, 1917, in Cobb 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 for 1936, due, \$120. for year 1935, \$30. for 1934, and \$300. for 1933, and unpaid be paid to her.

Sworn to and subscribed before me this 27th day of April, 1936.
Jessie M. Anderson Ordinary } Mrs. Kate W. Lynes (L. S.)
 Cobb County
 (Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cobb County.

Personally before me comes Mrs. Jessie M. Anderson, who on oath says that she knew J. Colton Lynes while in life and that she knows Mrs. Kate W. Lynes, the above applicant; and knows that the said J. Colton Lynes and Kate W. Lynes were in due form of law married in the County of Cobb in the State of Georgia on the 10th day of April, 1917, and that they were residing together as husband and wife at the time of his death on the 26th day of February, 1936, and that she is his dependent widow.

Sworn to and subscribed before me this 27th day of April, 1936.
Jessie M. Anderson Ordinary }
 Cobb County
 (Seal of Ordinary)

INSTRUCTIONS:

1. The form of application must be filled out.
 2. The form must be filled out by the applicant or by a person authorized by the applicant to do so.
 3. The form must be filled out by the applicant or by a person authorized by the applicant to do so.
 4. The form must be filled out by the applicant or by a person authorized by the applicant to do so.
 5. The form must be filled out by the applicant or by a person authorized by the applicant to do so.
 6. The form must be filled out by the applicant or by a person authorized by the applicant to do so.
 7. The form must be filled out by the applicant or by a person authorized by the applicant to do so.
 8. The form must be filled out by the applicant or by a person authorized by the applicant to do so.
 9. The form must be filled out by the applicant or by a person authorized by the applicant to do so.
 10. The form must be filled out by the applicant or by a person authorized by the applicant to do so.

February, 1936, and that she is his dependent widow.

Sworn to and subscribed before me this 27th day of April, 1936.

Jessie M. Anderson
Ordinary
Cobb County

(Seal of Ordinary)

INSTRUCTIONS:

1. The purpose of this form is to provide a means of recording evidence in support of an application for a pension, which may be made by the applicant or by any other person for whom he is dependent, and to provide a means of recording evidence in support of an application for a pension, which may be made by the applicant or by any other person for whom he is dependent.

A. L. HENSON,
DIRECTOR

C. ARTHUR CHEATHAM,
ASST. DIRECTOR

MISS LILLIAN HENDERSON,
ASST. DIRECTOR



THE VETERANS SERVICE OFFICE

STATE CAPITOL
ATLANTA

IN RE: Application of Mrs. Kate W. Lynes,
widow of J. C. Lynes, Fulton County,
for pension balances accrued to her
husband for years 1933, 1934 and 1935:

It appearing that the late husband of this applicant established his right to a pension as a Confederate veteran and was such a pensioner at the time of his death; that applicant was married to said pensioner and that she lived with her said husband to the date of his death and has not since remarried, and that the pension payments which had accrued to the husband, but had not been paid to him, are due applicant, under the Act of 1901, (4180), for 1933, \$80. for 1934 and \$400. for 1935, this application is approved, and it is ordered that said payments be made to applicant, by the Ordinary of Fulton County, as and when they may become payable.

This the 29th day of April, 1936.

A. L. Henson

FULTON COUNTY



GEORGIA

THOMAS H. JEFFRIES



April 28, 1936.

Hon. A. L. Henson,
Veterans Service Office,
State Capitol,
Atlanta, Ga.

Dear Sir:

I am today in receipt from Hon. J. J. Daniel, Ordinary, Cobb County, Georgia, of application of Mrs. Kate W. Lynes for Confederate pension due her deceased husband, Jesse Colton Lynes, who was on the pension roll of Fulton County, although, at the time of his death, he was a resident of Cobb County.

I presume that the payments due Mrs. Lynes will continue to be paid through Fulton County but will be glad to have advice from you in this particular.

Very truly yours,

Thomas H. Jeffries

ORDINARY.

by the Ordinary of Fulton County, as and when they may become payable.

This the 29th day of April, 1936.

[Signature]
Ordinary

Very truly yours,

[Signature]
ORDINARY.

COURT OF ORDINARY, COBB COUNTY
JAMES J. DANIELL, ORDINARY
MARIETTA, GA.

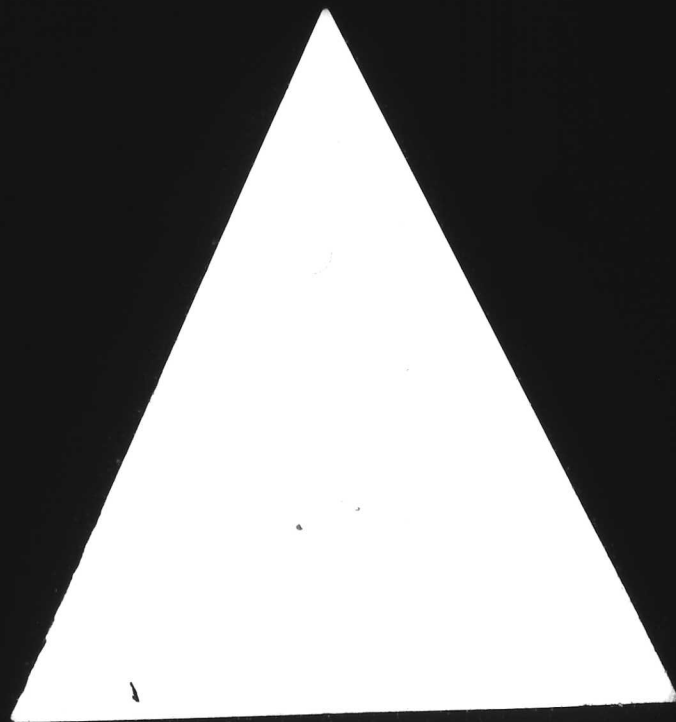
MARRIAGE CERTIFICATE

STATE OF GEORGIA, COBB COUNTY.

THIS IS TO CERTIFY that J. Colton Lynes and Miss Kate S. Winn were united in the Holy Bonds of Matrimony by Randolph R. Claiborne, Minister of the Gospel, on the 10th day of April, in the year of our Lord, 1917, as appears of record in my office in Marriage Record, book "G", page 371.

This 27th day of April, 1936.

[Signature]
Ordinary



*Lynn vacated by order of the Court
Edith R. ...
162 ...
No. ...*

INDIGENT PENSION

1898.

Name *James Lynn*
County *Fulton*
Co *B-16 Ga*

Approved _____ 1898

RICHARD JOHNSON,
Commissioner of Pensions

WARRANT HANDED TO

GEN. W. HARRISON, STATE PRINTER, ATLANTA

*11/30-1905
1/2-11*

*Pension off for 7/24/98
Must state date
this plan he was
captured as prisoner of war
& when released - and
prove this by a
Witness who was
present with him
at the time of his
capture & that his
status at the time
of capture was
as a prisoner of war
and that
No. 1000000000
Coins of Pensions*

POWER OF ATTORNEY.
STATE OF GEORGIA.
COUNTY.
I, _____ of _____
hereby authorize
to receive and receipt for the pension allowed, and request that he remit same to, _____
Witness my hand and seal this _____ day of _____ 1898.
Executed in presence of _____
(L.S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY,

I, _____, hereby authorize

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

at _____ day of _____ 1898.

Witness my hand and seal this

_____ day of _____ 1898.

Executed in presence of _____ (L. S.)

*Rec'd in office 7/24/98
Rec'd State date
then please the
Captured no more of them
before released and
more then by a
prisoner who was
taken into their
prison 4 1/2 years
knowing that his
writing about them
was being edited
and then
C. W. L. Linder
Chairman*

INDIGENT PENSION

1898.

Name *Frank Lynn*

County *Franklin*

Co *B-16*

Approved

RICHARD JOHNSON,

Commissioner of Pensions

WARRANT HANDED TO

11/30-1911

Questions for Applicant.

STATE OF GEORGIA,

County,

_____ of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly 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). *Frank Lynn Franklin Co Ga*
2. How long and since when have you been a resident of this State? *Since I was born in 1844*
3. When and where were you born? *Franklin Co Ga*
4. When and where and in what company and regiment did you enlist or serve? *In 1861 Co A 1st Regt Ga Inf*
5. How long did you remain in such company and regiment? *During the war*
6. For how long a period did you discharge regular military duty? *During the war*
7. When, where and under what circumstances were you discharged from service? *Discharged in 1865*
8. What is your present occupation? *Farmer*
9. How much can you earn (gross) per annum by your own exertions or labor? *Not more than \$100*
10. What has been your occupation since 1865? *Farmer*
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? *Age 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? *Since 1865*
13. What property, effects or income do you possess, and its gross value? *Not more than \$100*
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? *Not more than \$100*
15. In what County did you reside during those years, and what property did you then return for taxation? *Franklin Co Ga*
16. How were you supported during the years 1896 and 1897? *By my own labor*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *Not more than \$100*
18. What was your employment during 1896 and 1897? What pay did you receive in each year? *Farmer*
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? *Yes, wife and children*
20. Are you receiving any pension? If so, what amount, and for what disability? *No*

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

W. H. Kennedy Ordinary

of *Franklin* County.

Applicant.

Every Question MUST be Answered

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

COUNTY.

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

1. What is your name and where do you reside?
2. Are you acquainted with _____, the applicant; if so how long have you known him?
3. Where does he reside, and how long and since when has he been a resident of this State?
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, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service?
7. What property, effects or income has the applicant? (Give your means of knowledge.)
8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same?
9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom?
10. What is the applicant's occupation and physical condition?
11. Is the applicant unable to support himself by labor of any sort, if so, why?
12. How was he supported during the years 1896 and 1897?
13. What portion of his support for these two years was derived from his own labor or income?
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?

16. What interest have you in the recovery of a pension by this applicant?
Sworn to and subscribed before me, this _____ day of _____, 1898.

John P. Webb Ordinary.

Given in _____ County.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

COUNTY.

Personally came before me, Dr. W. B. Sharp & J. A. Steele and _____, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully _____, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

That he is suffering from infirmities and disabilities of old age: that he is unable to perform manual labor.

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

Sworn to and subscribed before me this _____ day of _____, 1898.
W. B. Sharp M.D.
J. A. Steele M.D.
Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

COUNTY.

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

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

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

I further certify that the tax digests of _____ County show that applicant returned for taxation in his name in 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 _____ day of _____, 1898.

Ordinary
of _____ County.

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answer make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
2. Additional affidavits may be attested 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, *Jacob W. Lynn* hereby authorize *J. W. Lynn*
12-10-1902 of *12-10-1902*

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

by _____
 Witness my hand and seal, this *13* day of *January* 1902.

Jacob W. Lynn [L. S.]

Executed in presence of

John W. Williamson
Ordinary

Lynn, Jacob
Fulton County

COPIES SENT TO THE
 (FOR THOSE ALREADY ENROLLED.)

No. *108*

INDIGENT
 SOLDIER'S PENSION
 1902.

Name *Jacob W. Lynn*
 County *Fulton*
 Co. *108*

WARRANT ISSUED

1902

1/14

JOHN W. LINDSEY,
 Commissioner of Pensions

WARRANT HANDED TO

J. W. Lynn
 Com. of Pensions, State Prison, Atlanta.

108

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears Jacob Lynn 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 1st day of June 1880; that he is 60 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 1 1/2 years in Company 12, of 16th Regiment of Cal; that his physical condition is as follows:

that his property consists of the following items

of the value of nothing 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 13 day of June 1902.

Ordinary.

STATE OF GEORGIA,
Fulton County.

I, John R. Wilkinson,

Ordinary of said County,

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

Given under my official signature and seal, this 13 day of June 1902.

Ordinary Fulton County.

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

Georgia In and out of

affidavit state that I was captured at
Cold Harbor Va. June 3rd 1864 remained
in Prison till about the first of March
1865, and to and ^{affidavit}
subscribed before me this 30th 1899

Mary Ann
Georgia

Georgia In and out of

W. S. Woodall
deposes and says
~~the says~~ he is well acquainted
with Jacob Lypin & has been ever
since 1855. We know of my own
personal knowledge of his capture
and imprisonment and I further
know of his condition and that his
statements in his Application for
pardon is true and are worthy
of credit and belief

W. S. Woodall
before me this 30th 1899

Mary Ann
Georgia

Georgia In and out of

Question 8. What property, effects, or income did
the applicant possess in 1896 & 1897, and
what disposition, if any did he make
of the same? not any

Question 9. Has he embezzled any of his property in
the last three years, if so, what was
it and to whom? none

Question 10. What is the applicant's occupation and
physical condition? Labor & very poor

Question 11. Is the applicant unable to support
himself by labor of any sort, if so,
why? age from old age

Question 12. How was he supported during the years
1896 & 1897? by his family

Question 13. What portion of his support for those
two years was derived from his own
labor or income? none scarcely

Question 14. Give a free and complete statement
of the applicant's physical condition
that entitles him to a pardon under
the act of December 10th 1894?

he seems to be very feeble & infirm
J. C. Pease
Witness

Subscribed before me this
the 30th day of Sept 1899

J. C. Pease, J.P.

Ordinary
Mary Ann

that entitle him to a pecuniary under
the act of December 10th 1894.
he seems to be very feeble & infirm
yours sincerely
Witness.

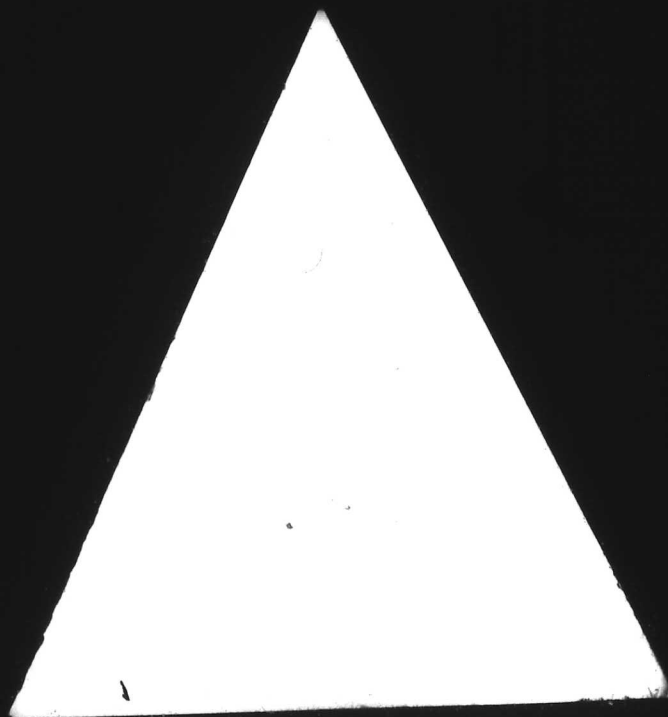
I was in
 the 22 day of Sept 1899
 J. B. Price, J. P.
 Ordway
 M. H. Price, ordway

Atlanta, Ga, *Mar* 20 1899

Hon Richard Johnson
Dear Sir

Mr J Lyne came in the even in
his application has been complied
with. I do not visit him early hope
that a pension will be granted
him - as I have let us know
meritorious case could be brought
up for you Truly & Affly

Truly & Affly
W B Kennedy
Or any



POWER OF ATTORNEY.

STATE OF GEORGIA,
County, }

I, _____ of _____

do hereby authorize

Witness my hand and seal this _____ day of _____

Executed in presence of _____

Attest Richard Johnson
By my hand and seal this
No. 749
Hull Co

INDIGENT PENSION
1895.

Name *Geo W Lyon*
County *Fulton*

Ground
Jay 1st 1896
RICHARD JOHNSON,
Secretary Executive Department

WARRANT HANDED TO:

Appel

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I,

hereby authorize

of

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

at

by

Witness my hand and seal this

day of

1895.

Executed in presence of

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Fulton

County.

George H. Lygon

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

1. What is your name and where do you reside? (give State, County and post office)
George H. Lygon, Fulton Co. Ga. Atlanta P.O.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
Resided in Atlanta - Resident of this State since 1838.
3. When and where were you born?
Born Aug. 16, 1838, in DeKalb Co. Ga.
4. Did you volunteer in the Confederate Army or in the Georgia Militia?
Confederate.
5. When and where did you enlist?
Atlanta Ga. May 18, 1862.
6. In what company and regiment did you enlist?
Co. D. 72d Ga. Reg.
7. How long did you remain in that company and regiment?
In Reg. till end of Nov. 1864.
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
Transferred from Co. D to Co. H, 42d Ga. Reg. - date not remembered.
9. For how long a period did you discharge regular military duty?
Three years.
10. When, where and under what circumstances were you discharged from service?
Discharged from service when Johnson surrendered and Co. H was 1865.
11. What is your present occupation?
No regular occupation.
12. How much can you earn per annum by your own exertion or labor?
About \$50.00.
13. What has been your occupation since 1865?
Farming, Carpentry & Milling.
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income?
For support \$100.00. Contribution \$50.00.
15. What is your present physical condition and how long have you been in such condition?
Weak. Have steadily declined for past eight years.
16. 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 & Poverty.
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?
My infirmity is a diseased nervous system, brain, heart and eyes, and partial paralysis of left arm.
18. What property, effects or income do you possess?
None.
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same?
None.
20. In what County did you reside during those years and what property did you then return for taxation?
In Fulton Co. No property to return for taxes.
21. How were you supported during the years 1893 and 1894?
Supported by a son and my own earnings.
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
Cost about \$60.00 to \$70.00. Contributed \$40.00 to \$50.00.
23. What was your employment during 1893 and 1894? What pay did you receive in each year?
Carpenter, amount not small - do not remember.
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support?
Married, wife living. Ten children, five girls, three boys, all living. Three at home, two girls & one boy. Boy is two girls & one boy. No means of support only by labor.

INDIGENT PENSION

1895.

Name

Geo W Lygon

County

Fulton

Ground

July 15, 1894

RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDED TO

app

One of Returns, State Printer, Atlanta.

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

Receiving no pension from any source.

Sworn to and subscribed before me this the

30th day of *April* 1895.

W. L. Calhoun Ordinary

of

Fulton

County.

George W. Lyon
Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton County.

Warren H. Williams

as a witness in support of the application of *George W. Lyon* for pension under the Act approved December 15th, 1894, and after being duly sworn the answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? *Warren H. Williams*
83 Adams St. Atlanta Ga
2. Are you acquainted with *Geo. W. Lyon*, the applicant, if so how long have you known him? *Yes have known him 35 years*
3. Where does he reside, and how long has he been a resident of this State? *He Atlanta*
Ever since I have known him
4. Do you know of his having served in the Confederate army or the Georgia militia? If so, do you know this? *Yes. I was in the army with him*
5. When, where and in what company and regiment did he enlist? *He enlisted in*
Co. D. 42nd Reg. May 1862
6. Were you a member of the same company and regiment? *Member of same Reg*
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? *Spent time*
of enlistment till close of the war
was a faithful soldier
of the war. Was honorably discharged
8. What property, effects or income has the applicant? (Give what you know of knowledge.) *None. I am family with physical*
and financial condition. Had himself poor.
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *None*
10. What is the applicant's occupation and physical condition? *No regular occupation.*
Physical condition very bad.
11. Is the applicant unable to support himself by labor of any sort, if so, why? *Yes*
he cannot physically
12. How was he supported during the years 1893 and 1894? *By Gov and what*
little could himself earn.
13. What portion of his support for these two years was derived from his own labor or income? *I do not know from what of him must have very little.*
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? *Has spent trouble and care in*
and eyes, and is affected paralysis in
a word is a physical wreck.
15. What interest have you in the recovery of a pension by this applicant? *None*

Sworn to and subscribed before me, this

the *30th* day of *April* 1895.

W. L. Calhoun Ordinary

Warren H. Williams

Applicant

Witness

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton

County.

Personally came before me *J. H. Reeve* and
L. P. Stephens, both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully *Geo.*
H. Lyon
applicant for pension under the Act of 1894, and after
such personal examination, say that his precise physical condition is as follows:

Partial paralysis of left arm
Highly nervous organization
Insomnia of variability of sleep.
Subject of mental exaltations.

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

Sworn to and subscribed before me, this

the *30th* day of *April* 1895.

W. L. Calhoun Ordinary
County

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton

County.

1. *W. L. Calhoun* Ordinary in and for said County, hereby certify that the applicant *George W. Lyon* 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: *Warren H. Williams, L. P. Stephens & J. H. Reeve* 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 were signed.

I further certify that the tax digests of *Fulton* County show that applicant returned for taxation in his name in 1893, *nothing* dollars of property, and in 1894, *nothing* dollars of property.

Witness my hand and seal of office, this *30th* day of *April* 1895.

W. L. Calhoun 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."

the 3rd day of April 1896.
W. L. Calhoun
Minister

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,

Executed in presence of _____

[L. S.]

ACT OF 1890, CH. 100.

(For Those Already Enrolled.)

No. 65

INDIGENT

Soldier's Pension.

1897.

Name _____
County _____

1897

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

W. L. Calhoun

(For Those Already Enrolled.)

No. 395

INDIGENT

SOLDIER'S PENSION,

1898.

Name _____
County _____

WARRANT ISSUED

4/12

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

W. L. Calhoun

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,

Executed in presence of _____

[L. S.]

ACT OF 1890, CH. 100.

(For Those Already Enrolled.)

No. 395

INDIGENT

SOLDIER'S PENSION,

1898.

Name _____
County _____

WARRANT ISSUED

4/12

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

W. L. Calhoun

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears

E. H. Lyon 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 *1st* day of *June* 18*75*; that he is *59* 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 *3 years* in Company *D*, of *10th* Regiment of *Georgia* *Infantry*; that his physical condition is as follows: *Paralysis - 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 1897. I have heretofore as a resident of *Fulton* county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, the

11th day of *January* 1897. *W. H. Wadsworth* Ordinary.

STATE OF GEORGIA,

Fulton County.

I,

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

Given under my official signature and seal, this *11th* day of *January* 1897.



W. H. Wadsworth Ordinary *Fulton* County.

NOTE:—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears

E. H. Lyon 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 *1st* day of *August* 18*75*; that he is *60* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3 years* in Company *D*, of *12th* Regiment of *Georgia* *Infantry*; that his physical condition is as follows: *Paralysis - 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 1898. I have heretofore as a resident of *Fulton* county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the

12th day of *January* 1898. *W. H. Wadsworth* Ordinary.

State of Georgia,

Fulton County.

I,

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

Given under my official signature and seal, this *12th* day of *January* 1898.



W. H. Wadsworth Ordinary *Fulton* County.

NOTE:—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I,

hereby authorize

of

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

at

by

Witness my hand and seal this

day of

1899.

Executed in presence of

(L. S.)

CODE SEC. 1264.

(For Those Already Enrolled.)

No. 317

INDIGENT

SOLDIER'S PENSION,

1899.

Name

County

WARRANT ISSUED

1899

RICHARD JOHNSON

Commissioner of Pensions

WARRANT HANDLED TO

John W. Harrison, State Printer, Atlanta.

CODE SEC. 1264.
(For Those Already Enrolled.)

NO. 317

INDIGENT

SOLDIER'S PENSION,

1900.

Name

County

WARRANT ISSUED

1900.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

John W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
FULTON County.

Personally appears G. M. Lyon 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 2nd day of Aug 1878; that he is 61 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Confederate) during the war between the States, and served for the term of 3 years in Company D, of 72nd Regiment of

that his physical condition is as follows:

Paralysis - 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 1890. I have heretofore as a resident of FULTON county been allowed a pension for the year 1890.

Sworn to and subscribed before me, this, the _____ day of _____ 1890.

G. M. Lyon Ordinary.

State of Georgia,
FULTON County.

I, W. H. HULSEY, G. M. Lyon Ordinary of said County, do certify that I am well acquainted with G. M. Lyon the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____ 1890.

G. M. Lyon

Ordinary FULTON County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
FULTON County.

Personally appears G. M. Lyon 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 2nd day of Aug 1878; that he is 62 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Confederate) during the war between the States, and served for the term of 3 years in Company D, of 72nd Regiment of

that his physical condition is as follows:

Paralysis - 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 1890. I have heretofore as a resident of FULTON county been allowed a pension for the year 1890.

Sworn to and subscribed before me, this, the _____ day of _____ 1890.

G. M. Lyon Ordinary.

State of Georgia,
FULTON County.

I, W. H. HULSEY, G. M. Lyon Ordinary of said County, do certify that I am well acquainted with G. M. Lyon the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____ 1890.

G. M. Lyon

Ordinary FULTON County.

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

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 _____

John W. Lindsey
John W. Lindsey
CODE SECTION 146
(For Those Already Enrolled.)
No. *444*
INDIGENT
SOLDIER'S PENSION.
1901.
Name *John W. Lindsey*
County *Pauline*
WARRANT ISSUED
Jan 14 1901.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
John W. Lindsey
John W. Lindsey, State Printer, Atlanta.
no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Dalton County. }
 Personally appears Geo. Lyon of Dalton
 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 April, 1863; that he is 63 years old
 and by occupation a farmer; that he enlisted in the military service of the Con-
 federate States (or of the State of GA) during the war between the
 States, and served for the term of 3 years in Company 3, of 12th Regiment
 of Georgia Inf'y; that his physical condition is as
 follows:

Paralysis Genic Sensibility
 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 Dalton
 county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this the 12 day of January, 1901. L. M. Bygon
John R. Wickens Ordinary.

STATE OF GEORGIA,

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

Given under my official signature and seal, this 12
 day of January, 1901.
John R. Wickens
 Ordinary Dalton County.



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

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 _____

Lyon, George W.
Fulton County
CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 334

INDIGENT

**SOLDIER'S PENSION
1902.**

Name *Geo W Lyon*
County *Fulton*
Co. *D* Regiment *42*

WARRANT ISSUED

1/14 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

no date
Lyon, George W.
Fulton County
CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 336

INDIGENT

**SOLDIER'S PENSION
1903.**

Name *Geo W Lyon*
County _____
Co. *D* Regiment *42nd*

WARRANT ISSUED

1/20 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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 _____ 1903. [L. S.]

Executed in presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County,

Personally appears Geo W Lyon 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 12 day of Aug 1828; that he is 64 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 yrs in Company D, of 42d Regiment of Ga Regulars; that his physical condition is as follows: Analys 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 1902. I have heretofore as a resident of Fulton county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the

day of JAN 1902.

STATE OF GEORGIA,

Fulton 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 JAN 1902.



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 Geo W Lyon 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 12 day of Aug 1828; that he is 64 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 yrs in Company D, of 42d Regiment of Ga Regulars; 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 1903. 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 1903.

STATE OF GEORGIA,

_____ County,

I, _____ Ordinary of said County, do certify that I am well acquainted with Geo W Lyon the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1903.



Ordinary _____ County.

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



day of _____ 1902.
Ordinary Fulton. County.

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



day of _____ 1903.
Ordinary _____ County.

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

NAME, Lyon, George W.

WHEN AND WHERE BORN? August 18th. 1858 Dekalb County.

ENLISTED WHEN AND WHERE? Atlanta, Ga. May 15th. 1868.

COMPANY AND REGIMENT? Co. D, 42nd. Ga. Regt.
Transferred: Co. H,

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED,

WHEN AND WHERE SURRENDERED? 1865

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSED, Warren H. Williams. No date.
Same Regt.

P.O. 1896 COUNTY. Fulton County.

JWT

DIED, WHEN AND WHERE?

BURIED,

WITNESSED,

Warren H. Williams. No data.
Same Regt.

P.O.

1896

COUNTY.

Fulton County.

JWT

**WIDOW'S
INDIGENT PENSION.
1903.**

Name Nancy A. Lyon
County Fulton
Widow of W. A. Lyon
D. 4/2 1/2
Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1903.

Geo. W. Harrison, State Printer, Atlanta.

1/18/05

**POWER OF ATTORNEY.
STATE OF GEORGIA.**

I, _____, hereby authorize _____
of _____ County, to receive and receipt for the pension allowed and that he
present the same to me at _____ day of _____ 190____
Witness my hand this _____ day of _____ 190____
Executed in presence of _____
Ordinary, _____
County, _____ I. R.

{
not
used
}

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____ County, to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190 _____

Executed in presence of _____

Ordinary,

L. S.

County.

SEAL

WIDOW'S

INDIGENT PENSION.

1903.

Name Nancy A. Lyons

County Fulton

Widow of Wm. D. Lyons

D-44 Ga

Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1903.

John W. Lindsey, Commissioner of Pensions.

11/18/03

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County. }

_____ of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Post-office) Nancy A. Lyons State of Ga. Fulton Co. P.O. Atlanta Ga.
2. How long and since when have you been a resident of the State? Since 1858
3. When and where were you born? Born 1838 July 24th Macon Ga.
4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license to every case.) Aug 12th 1858 Beulah Co. Ga
Wm. D. Lyons
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? Enlisted in Company 42nd Ma. Inf. 1862
6. How long did your husband serve in said Company and Regiment? until close of war
7. When and where did your husband's Company and Regiment surrender and was discharged? at Appomattox Va. April 26th 1865
8. Was your husband present at the time and place when his Company and Regiment surrendered? He was
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?
10. When and where did your husband die? April 8th 1903 Atlanta Ga.
11. 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 and Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight? Chronical Bronchitis for 25 years and unable to perform manual labor
13. What has been your occupation since your husband's death? No occupation
14. How much can you earn gross, by your own exertion or labor? Nothing
15. What property, real or personal, or income do you have or possess, and its gross value? No property. No income
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, and what disposition, if any, by sale or gift, have you made of the same? Nothing
17. In what business did you reside in 1899, 1900, 1901 and 1902, and what property did you return for taxation? Nothing
18. How have you been supported since death of husband, and especially for 1899, 1900, 1901 and 1902? Supported by husband until April 8th 1903, by pension on his death since then
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? about four hundred dollars each year. I contribute nothing
20. What was your employment during 1899, 1900, 1901 and 1902—how much did you receive for each year? received nothing not able to work at anything
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? 2 daughters and 2 sons. One son is a soldier. One daughter is a widow. One son is a student. One daughter is a student.
22. Have you ever made application for pension before? No
23. How many applications have you made for a Pension, and under what class? None

Sworn to and subscribed before me this _____ day of _____ 1903.

Nancy A. Lyons

of Fulton County.

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,

Fulton County.

of said State and County, having been presented as a witness in support of the Application of Mrs. Nancy A. Lyon for a Pension under the Act of 1900, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?
Otto Spahr, 718 E. 11th St., Atlanta
2. Are you acquainted with the applicant, Mrs. Lyon?
Yes
3. If so, how long have you known her?
About 25 years
4. Where does she reside, and how long and since when has she been a resident of this State?
Atlanta Fulton Co. resided in Ga. 68 years
5. When and where was she born?
Waltham Co., 1838
6. Were you ever acquainted with her husband?
Yes
7. Where did she reside in 1861?
Delaware Co., Ga.
8. When and to whom was he married?
He was married to Nancy A. Lyon 1860
9. When and where was he born?
Delaware Co., Ga. 1838
10. How long have you known him?
Since 1864
11. When and where did N. A. Lyon enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this?
Co. D. 42nd Regt.
12. Were you a member of the same Company and Regiment?
I was a member of the same regiment and in the same Co.
13. How long did he perform regular military duty?
To the close of the war
14. When and where was his Company and Regiment surrendered and discharged from service?
April 26th 1865 near Appomattox
15. Were you with the Command when it surrendered?
Yes
16. Was N. A. Lyon the husband of applicant present?
He was.
17. If not present, where was he?
He was.
18. When and where did he leave his command?
He was.

For what cause?

By whose authority he left?

How do you know all this? (State fully and clearly.)
I was with him at Appomattox

18. When and where did N. A. Lyon Atlanta die?
April 9th 1865
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?
at Atlanta Ga. from 1838 to 1865
20. Do you of your own knowledge know that applicant is the lawful widow of N. A. Lyon?
I do.
21. Has she remained unmarried since her soldier husband's death, and is now his widow?
Yes
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
No property or income.
23. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what disposition did she make of it?
Has none
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom?
None
25. What is applicant's physical condition and her chances and ability to earn a support?
Old & feeble - has absolutely no earning capacity.

26. Is applicant able to earn a support as labor of any sort, if not, why?
She is not, she is not able to work what she has

27. How was he supported for 1899, 1900, 1901 and 1902?
She was supported by the kindness of her children

28. How much did applicant contribute to her support for last two years?
None

29. Give a full and complete statement of applicant's physical condition?
She is slowly trying with Rheumatism

30. What interest have you in the recovery of the applicant?
I have none.

Subscribed before me this 1st day of January, 1902,
John D. Wickham Ordinary,
Fulton County,
G. H. Watkins (S)
Otto Spahr
N. A. Lyon Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally before me come Dr. J. McDaniel and Dr. C. S. Fisher, both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. Nancy A. Lyon applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this: Emaciated and generally debilitated resulting from chronic inflammation of kidney joints & general debility. Applicant also has occasional attacks of rheumatism when system and joints are inflamed. She is weak and we have no interest in said pension if she can work and is frequently forced to bed.

Subscribed before me this 1st day of January, 1902,
John D. Wickham Ordinary,
Fulton County,
J. McDaniel M.D.
C. S. Fisher M.D.
W. L. Manner M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, John D. Wickham Ordinary, in and for said County, hereby certify that the applicant, Mrs. Nancy A. Lyon resides in said County, and has been a bona fide resident of this State since the 1st day of January, 1860, and that the witnesses, Mr. Volentine Otto Spahr, John D. Wickham are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same were signed and subscribed.
I further certify that the tax digest of Fulton County shows that applicant returned for taxation in her own name in 1899 0 dollars worth of property, and in 1900 0 dollars worth of property, and in 1901 0 dollars worth of property.

Witness my hand and official seal this 1st day of January, 1902,
John D. Wickham 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 of you, and the evidence you shall give will be the whole truth: So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 9th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton COUNTY, I, Nancy A. Lyon, hereby authorize James R. Gars of Atlanta, Ga. to receive and receipt for the pension paid hereon, and request that he remit same to me at Chattahoochee, Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 19 day of Jan, 1906.

Executed in presence of

Nancy A. Lyon [L. S.]
Mark

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton COUNTY, I, Nancy A. Lyon, hereby authorize James R. Gars of Atlanta, Ga. to receive and receipt for the pension paid hereon, and request that he remit same to me at my home

In Witness Whereof, I have hereunto set my hand and seal, this 19 day of Jan, 1907.

Nancy A. Lyon [L. S.]
Mark

Lyon, Nancy A. (mo)
Fulton Co.

To Those Heretofore Paid.

1906.

No. 242

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO

Nancy A. Lyon

County of Fulton

Widow of G. W. Lyon

Co. D. 42nd Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1906.

AND REMITTED TO

James R. Gars

THE PENSIONER PRINTED AND PUBLISHED BY, ATLANTA, GA.

Lyon, Nancy A.
Fulton Co.

To Those Heretofore Paid.

1907.

No. 163

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

Nancy A. Lyon

County of Fulton

Widow of G. W. Lyon

Co. D. 42nd Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1907.

AND REMITTED TO

James R. Gars

THE PENSIONER PRINTED AND PUBLISHED BY, ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

Nancy A. Lyon

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 1888.

That she is the Widow of G. W. Lyon who was a soldier in Company D. of the 42nd Regiment of Ca.

Volunteers, that he enlisted in said regiment on or about the month of April 1865, and served in the Army up to April 26th 1865. That he died on the 18th day of April 1865.

Infirmity and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 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 15th day of Jan, 1906.

Nancy A. Lyon
Ordinary.
Post Office Blackshear, Ga.

State of Georgia,

County of Fulton

I, John A. Withinson

Ordinary of said County, certify that I am well acquainted with Mrs. Nancy A. Lyon, 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 1888.

Given under my official signature and seal, this the 19th day of Jan, 1906.

Official Seal

John A. Withinson
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.

Form No. 2

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

Nancy A. Lyon

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 1888.

That she is the Widow of G. W. Lyon who was a soldier in Company D. of the 42nd Regiment of Ca.

Volunteers, that he enlisted in said regiment on or about the month of April 1865, and served in the Army up to April 26th 1865. That he died on the 18th day of April 1865.

Infirmity & poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 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 15th day of JAN 2nd, 1907.

Nancy A. Lyon
Ordinary.
Post Office Blackshear, Ga.

State of Georgia,

County of Fulton

I, John A. Withinson

Ordinary of said County, certify that I am well acquainted with Mrs. Nancy A. Lyon, 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 1888.

Given under my official signature and seal, this the 17th day of JAN, 1907.

Official Seal

John A. Withinson
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's Office, Atlanta, January 17 1907

I, John P. Wilkinson, Ordinary of said County,
certify that *G. H. Buckett* *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 14th day of December 1908,
and that all his official acts as such are entitled to full faith and
credit.

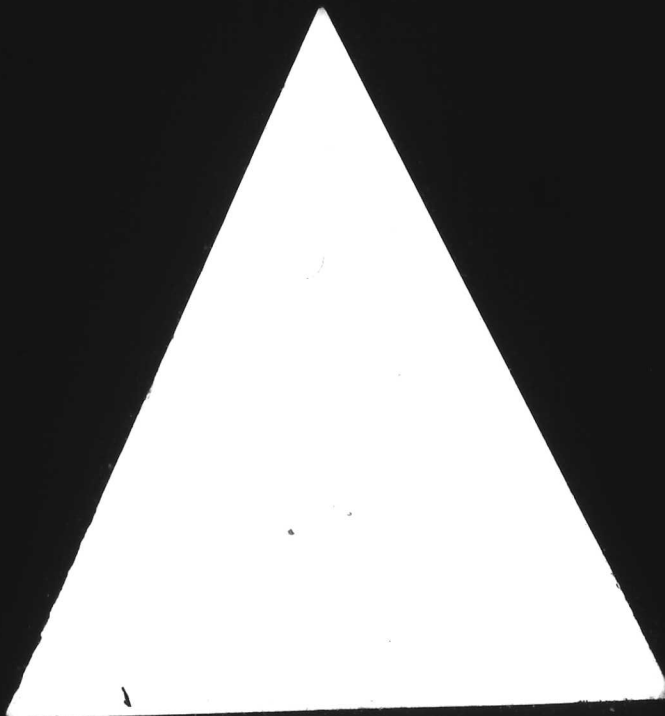
Given under my official signature and seal of office, the day and year
above written.

John P. Wilkinson
ORDINARY.

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 R. Core Kinison
ORDINARY.



NOTES.

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

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proof to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and permanently useless.

and essentially useless.

5. At this point, however, 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."

3. 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."

6. Every application must be certified by the District Attorney that the proposed amendments are added to any of the exhibits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.

The Ordinaries of the several counties are authorized to receive the application must be certain of the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

and applicants to these points.

APPLICATION FOR ALLOWANCE

General disability 60%
malicious A. A. M. & the

Applicant A. A. M. H. Bee

County Fuller

Amount 52

Date of Warrant Feb 257

Entered on record

July 25 1889

SECRETARY EXECUTIVE DEPARTMENT.

Ec 14
apple cany

STATE OF GEORGIA,

Fulton County.

PERSONALLY came before me E. D. Brady N.P.
J. H. Butler & A. H. Malcom & W. B. Smith
citizens of Fulton county, in said State,
who, being duly sworn, say that they are acquainted with A. H. Malcom
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 Fulton county, and we
are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this

22 day of February 1889

E. D. Brady N.P.

J. H. Butler
A. H. Malcom
W. B. Smith

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

STATE OF GEORGIA,

Fulton County.

PERSONALLY comes before me W. L. Latham Ordinary of said county,
J. W. Carmichael & J. H. Vining, both known to
me as reputable physicians of said county, who, being severally sworn, say on oath that
they have carefully examined A. H. Malcom and after such
examination say that the applicant has been injured as follows: By gunshot

wound in the right hip ball entering the upper segment of the hip
bone tearing through a portion of the crest of said bone penetrating
muscles and passing deep near the umbilicus. Effusion
of blood in the region of the hip joint
caused from loss of bone and great pain in the hip
attachment, contraction and atrophy of the muscle causing
severe pain from exertion of any kind thus rendering him unable to perform
the ordinary manual avocations of life

Sworn to and subscribed before me, this

22 day of February 1889

W. L. Latham

ORDINARY.

J. H. Vining M.D.
J. W. Carmichael M.D.

READ NOTE.—The physicians will state fully the nature of the wound, and then give some idea of the extent of the disability resulting therefrom.

STATE OF GEORGIA,

Fulton County.

I, W. L. Latham Ordinary of said county,
do certify that I am well acquainted with A. H. Malcom the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in 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 E. D. Brady before
whom the foregoing affidavits were made and power of attorney was signed, is a
Notary Public of said county, and the said affidavits and signa-
tures thereto are genuine.

Given under my official signature and seal, this 20 day of February 1889

W. L. Latham

Ordinary Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton 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 ser-
vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
authorizing my said attorney to receipt in my name for any Warrant that may be issued by
the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this _____
day of _____ 1889

Executed in the presence of us: _____

(L. S.)

STATE OF GEORGIA,

Fulton County.

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

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

Given under my official signature and seal, this *6* day of *February*, 189*0*

W. L. Lealman

Ordinary

Fulton

County.

STATE OF GEORGIA,

Fulton County.

I, *W. L. Lealman* Ordinary of said County,
do certify that I am well acquainted with *A. D. McAlister* 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 *4* day of *Feb*, 189*1*.

W. L. Lealman

Ordinary

Fulton

County.

McAlister, A. D.
Fulton Co.

1890.

McAlister, A. D.

No. 457

APPLICATION FOR ALLOWANCE.

FOR

Leg. Disables
Applicant: A. D. McAlister

County: *Fulton*

Amount: *\$50.00*

Date of warrant: *Feb 7*

Entered on record

Feb 7 1890

Geo. H. H.

Ind. data

WARRANT ISSUED TO

Applicant

McAlister, A. D.
Fulton Co.
McAlister, A. D.
1891

Feb 1891

No. 457

Application for Allowance

FOR THE YEAR BEING OFFERED IN 1891.

Dis. by body members
Applicant: A. D. McAlister

County: *Fulton*

Amount: *\$50.00*

Date of Warrant: *Feb 11*

Entered on record

Feb 11 1891

Geo. H. H.

WARRANT ISSUED TO

Applicant

Applicant

Applicant

Applicant

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Hallen County.

PERSONALLY appears *A. A. McCalister* of *Hallen* county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continuously since the day of *1886*; 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 *H*, of *28th* Regiment of *Georgia* Volunteers *Koolgambie's* Brigade; that whilst engaged in such military service, at the battle of *Ocean Pond* in the State of *Fla* on the *14th* day of *July* 1864, he was wounded as follows: *gun shot wound right hip and thigh rendering him incapable of performing the ordinary manual labor of a soldier.*

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 *6th* day of *July* 1891. *A. C. McCalister*
Notary Public for the State of Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Hallen County.

KNOW ALL MEN BY THESE PRESENTS, That I, *A. A. McCalister* of

county, in said State, do hereby appoint *A. C. McCalister* 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 *6th* day of *July* 1891.

Witness my hand and seal, this *6th* day of *July* 1891.

Notary Public for the State of Georgia.

Send money to me as follows, by *Direction*.

STATE OF GEORGIA

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Hallen County.

PERSONALLY appears *Alfred A. McCalister* of *Hallen* 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 *1882*; 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 *H*, of *28th* Regiment of *Georgia* Volunteers *Koolgambie's* Brigade; that whilst engaged in such military service at the battle of *Ocean Pond* in the State of *Fla* on the *21st* day of *July* 1864, he was wounded as follows: *shot through right hip and thigh rendering him incapable of performing the ordinary manual labor of a soldier.*

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 *4th* day of *July* 1891. *A. C. McCalister*
Notary Public for the State of Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Hallen County.

Know all Men by these Presents, That I, *A. A. McCalister* of

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *4th* day of *July* 1891.

Witness my hand and seal, this *4th* day of *July* 1891.

Notary Public for the State of Georgia.

Send money to me as follows, by *Direction*.

STATE OF GEORGIA

to

County, Georgia.

P. O.

STATE OF GEORGIA,

Fulton County.

I, *M. L. DeLoach* Ordinary of said county, do certify that I am well acquainted with *J. A. McPherson* 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

M. L. DeLoach
Ordinary *Fulton* County.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892

Name *J. A. McPherson*
County *Fulton*
Disability *Body worn*
Amount \$ *5.00*
Entered on record *March 1* 1892.

W. H. HARRISON.

Secretary of Revenue Department

AGENT.

Application

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

POWER OF ATTORNEY.
STATE OF GEORGIA, }

County. }

Know all Men by these Presents, That I _____ of _____ County, State of Georgia, do hereby appoint

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

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

Executed in the presence of us: _____

DIRECTION.

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

P. O.

McPherson, J. A.
Fulton Co.
1893.
Fulton
Application for Allowance
No. *17103*
For the Year Ending October 31, 1892.
Received *March 1*
Applicant, *J. A. McPherson*
County, *Fulton*
Amount, *\$5.00*
Date of Warrant, *3/1/92*
Entered on record, *3/1/92*
1893.
WARRANT NUMBER *7344*
Secretary of Revenue Department.
Wm. W. Harrison, State Printer, Atlanta, Ga.

STATE OF GEORGIA.

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Hull County.

PERSONALLY appears *A. D. McShan* of *Hull* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the _____ day of _____ 1883; 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 *H*, of 28th Regiment of *Georgia* Volunteers *Volunteer* Brigade; that whilst engaged in such military service at the battle of *Ocean Pond* in the State of *Florida*, on the *21st* day of _____ 1864, he was wounded as follows:

Right hip and side rendering him unable 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 _____ Dollars for _____ 1891.

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

W. L. Lockhart Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Hull County.

Know all Men by these Presents, That I, *A. D. McShan* 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 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 _____ day of _____ 1892.

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,

Hull County.

PERSONALLY appears *A. D. McShan* of *Hull* 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 _____ 1883; 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 *H*, of 28th Regiment of *Georgia* Volunteers *Volunteer* Brigade; that whilst engaged in such military service at the battle of *Ocean Pond* in the State of *Florida*, on the *21st* day of *February*, 1864, he was wounded as follows:

Right hip and side rendering him unable to perform the ordinary manual 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 26, 1893. I have heretofore been allowed a pension of _____ dollars, for _____ 1892.

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

W. L. Lockhart Ordinary.

STATE OF GEORGIA,

Hull County.

I, *W. L. Lockhart* Ordinary of said County, do certify that I am well acquainted with *A. D. McShan* 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 _____ day of _____ 1893.

W. L. Lockhart Ordinary *Hull* County.

FILED IN BOOK NO. _____

BOOK NO. _____

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 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 _____
County, Georgia.

P. O.

Soldier's Pension.

1894.

Do not allow 800-

Name A. A. McAbie

County Fulton

Disability 100%

Amount \$ 50.

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDLED TO

[Signature]

COPIES SECTION 100
(For Those Already Enrolled.)

From Northern Dec 1900

DISABLED

SOLDIER'S PENSION.

1901.

Name A. A. McAbie

County Fulton

Disability 100% in right leg

Amount, \$ 50.

June 18 1901.

JOHN W. LINDSEY

Commissioner of Pensions

WARRANT HANDLED TO

[Signature]

W. H. HARRISON, SECRETARY, ALABAMA.

me state

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 Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

PERSONALLY appears A. A. McAbie 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 83; 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 Corporal in Company F, of 28 th Regiment of Georgia Volunteers Colquitt's Brigade; that whilst engaged in such military service at the battle of Ocean Pond in the State of Fla, on the 21st day of February 186 3 he was wounded as follows: Shot through right hip and side rendering him incapable to perform the ordinary Manual 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 26, 1894. I have heretofore been allowed a pension of 50 dollars, for the year 189 3

Sworn to and subscribed before me, this, 12th day of March 1894. A. C. McAbie

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 A. A. McAbie the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 12th day of March 1894.



W. L. Calhoun
Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

Personally appears A. A. McAbie 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 30 years 18 83; that he enlisted in the military service of the Confederate States (or of the State of Fla) during the war between the States, and served as a Private in Company F, of 28 th Regiment of Fla Volunteers, Colquitt's Brigade; that whilst engaged in such military service in the State of Fla, on the 22 day of Feb 186 3, he was wounded, injured or diseased as follows:

Wounded in right hip at Ocean Pond
Feb Feb 22nd 1863

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 Fla County been allowed an invalid pension of 50.00 Dollars, for the year 1900.

Sworn to and subscribed before me, this the 17th day of June 1901. A. C. McAbie
John R. Wilkinson Postoffice Atlantic

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 A. A. McAbie the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 17th day of June 1901.



John R. Wilkinson
Ordinary Fulton County.
BOMER OF VLLORKEA

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: *McAfee, A. A.*
COUNTY: *Fulton Co.*
(FOR THOSE ALREADY ENROLLED.)

No. *727*

DISABLED

SOLDIER'S PENSION

1902.

Name *A. A. McAfee*
County *Fulton*
Co. *F* Regiment *28th Reg*
Disability *arm and right leg*
Amount, \$ *50.00*

1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. H. Lindsey, New Orleans, Alabama.

No data

NAME: *McAfee, A. A.*
COUNTY: *Fulton County*
(FOR THOSE ALREADY ENROLLED.)

No. *60*

DISABLED

SOLDIER'S PENSION

1903.

Name *A. A. McAfee*
County *Fulton*
Co. *F* Regiment *28th Reg*
Disability *arm and right leg*
Amount, \$ *50.00*

1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. H. Lindsey, New Orleans, 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 _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.)

Personally appears A. A. McAbie of Wilkes 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 September 1888; 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 Captain in Company F of 28th Regiment of Ga Volunteers, 1st Brigade; that whilst engaged in such military service in the State of Fla, on the 23 day of July 1863, he was wounded, injured or diseased as follows:

Wounded in right hip

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 Fifty County, been allowed an invalid pension of 50 Dollars, for the year 1901.

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

Post-office A. A. McAbie

Subscribed before me, this the 1st day of July 1902. I have heretofore, under said law, as a resident of Fifty County, been allowed an invalid pension of 50 Dollars, for the year 1901.

STATE OF GEORGIA,

County.)

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

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,

County.)

Personally appears A. A. McAbie of Wilkes 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 September 1888; 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 Captain in Company F, of 28th Regiment of Ga Volunteers, 1st Brigade; that whilst engaged in such military service in the State of Fla, on the 23 day of July 1863, he was wounded, injured or diseased as follows:

Wounded in right hip

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

Sworn to and subscribed before me, this the 1st day of JAN 1903.

Post-office A. A. McAbie

Subscribed before me, this the 1st day of JAN 1903. I have heretofore, under said law, as a resident of 50 County, been allowed an invalid pension of 50 Dollars, for the year 1902.

STATE OF GEORGIA,

County.)

I, John R. Wilkinson, Ordinary of said County, do certify that I am well acquainted with A. A. McAbie the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1903.



John R. Wilkinson Ordinary

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

Georgia, *Cherokee* County.

I the undersigned do certify that *W. H. McAdoo* now of the
County *Cherokee* is the same person who as *Private*
pensioner was on the pension rolls of this county, and drew a pension of *\$4.75* dollars
for 1900 and the bearer is same man.

Given under my hand and official seal of office *for reg. 1st* 1901

SEAL

H. L. Lindsey [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. *Fulton*

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

<i>McAdoo Co. Co.</i>	
<i>Fulton Co.</i>	
COSE SECTION 120.	
(FOR THOSE ALREADY ENROLLED.)	
No.	<i>10</i>
DISABLED	
SOLDIER'S PENSION	
1904.	
Name	<i>A. C. McAdoo</i>
County	<i>Fulton</i>
Co.	<i>4</i>
Disability	<i>Wounded & Maimed</i>
Amount, \$	<i>4.75</i>
	<i>1/21</i>
	1904.
JOHN W. LINDSEY,	
Commissioner of Pensions	
WARRANT HANDLED TO	
<i>W. H. McAdoo</i>	
Geo. W. Harrison, State Printer: 1814-15.	

no date

Georgia, Washington County.

I the undersigned do certify that N. A. McCalister now of the
County of Washington is the same person who as John R. Wilkinson
pensioner was on the pension rolls of this county, and drew a pension of \$1.75 dollars
for 1900, and the bearer is same man.

Given under my hand and official seal of office August 10th 1901.

N. A. McCalister [L. S.]

SEAL

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton County.

Personally appears A. A. McCalister

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 6 June 1863, 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 Captain in Company A, of 28th Regiment
of Georgia Volunteers' Brigade; that whilst engaged
in such military service in the State of Florida, on the 23 day
of Feb 1863, he was wounded, injured or diseased as follows:

Wound in right hip

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
505 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.

A. C. McCalister
Post-office.

John R. Wilkinson
Nors.—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 A. A. McCalister
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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.



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

Nors.—All vouchers and affidavits must bear date after January 1, 1904.

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

Audited

1889.

COMPTROLLER-GENERAL.

Fulton

Maimed Soldiers.

Voucher No. 840

Amount \$ 50.

Paid to A. A. McThee
For General disability
from body wound.
July 25, 1889.

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK.

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

Applicant

Audited

18

COMPTROLLER-GENERAL.

Maimed Soldiers.

Voucher No. 457

Amount \$ 50

Paid to A. A. McThee
For Leg. disabled

Feb 7 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK.

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

Applicant

No. 840
STATE OF GEORGIA, } Atlanta, Ga. Feby 25 1889
EXECUTIVE DEPARTMENT.

Mr. A. A. McAbee 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 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 the receipt on this voucher, and return same to
Executive Department for warrant.

By the Governor
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

\$50.
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
Fifty 00/100 Dollars,
per above voucher, this 25 of Feby 1889.

A. A. McAbee

No. 467
STATE OF GEORGIA, } Atlanta, Ga. Feby 7 1889
EXECUTIVE DEPARTMENT.

Mr. A. A. McAbee 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
Sey 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, 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,
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

\$50
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
Fifty 00/100 Dollars,

per above voucher, this 7 of Feby 1889
A. A. McAbee

NAME, McAbee, A. A.

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

COMPANY AND REGIMENT? Corporal, Co. H, 28th Regiment Ga. Vols.
Colquitts Brigade.

NAME OF CAPTAIN AND COLORFUL?

WOUND? At Ocean Pond Fla., Feb. 20, 1864 shot in right hip lodged .
in bowels.

WOUNDS, FLEW AND WOUNDS

RELEASED,

WHEN AND WHERE SURVEYED?

IF NOT PRESENT AT SURRENDER, WHEN AND WHERE?

DIED, WHEN AND WHERE?

FURTHER,

WITNESSES, ~~James M. Bates~~, M. F. Bates, S. A. Holcomb, W. B. Gossett.
No data.

P.O. 1899

COUNTY. Fulton

1889
Fulton

Audited, 1891.

COMPTROLLER GENERAL.

McAbee, A. A.

1891.

Maimed Soldiers.

Voucher No. 71

Amount \$ 50

Paid to A. A. McAbee

For Disability from
body wounds,
Feb 11 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant.

1891.

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.

No. 91

Atlanta, Ga. Feb'y 4 1891.

Mr.

A. A. McAbee

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

He is entitled to receive the sum

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. Whitlow

GOVERNOR.

By the Governor,

W. N. Harrison

SECY EXECUTIVE DEPARTMENT.

\$ 50⁰⁰

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

Fifty 00⁰⁰

Dollars.

per above voucher, this

4

of

Feb'y

1891

W. J. McAbee

\$ 50⁰⁰

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

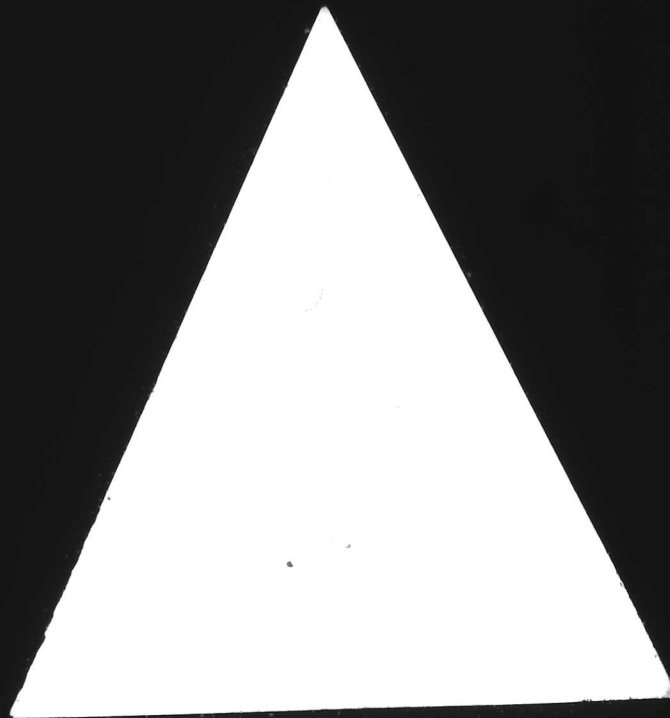
Fifty 000

Dollars,

per above voucher, this 4 of July

1891.

W. H. McCallie



McAdams & Co.
Adm. Sec. 1876
Adm. Sec. 1876
No. *1200*

Confederate

Soldier's Application.

UNDER ACT 1910.

County *Fulton*
Name *J. M. McAdams*
Company *B*
Regiment *Heavy Battery*
Mobile
Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

10/2-1880

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Fulton County.

J. M. McAdams of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office) J. M. McAdams
Bolton Fulton Co. Ga.
2. How long and since when have you been a continuous resident citizen of this State? all my life
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? enlisted in July 1864
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Co. 100 Cavalry 80th Mass. Battalion
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) until close of war
6. When and where was your Company and Regiment surrendered or discharged from the Service? Atlanta 1865
7. Were you actually present with your Command when it was surrendered or discharged? yes
8. If you were not actually present, state specifically and clearly where you were.
9. Where was your Command when you left it? Atlanta
10. When did you leave the Command? in April 1865
11. For what cause did you leave? surrounded
12. By whose authority did you leave?
13. For how long was your leave granted? In what way?
14. Why did you not return to your Command after leave expired? it had surrounded
15. In what way were you prevented?
16. What effort did you make to return?
17. Were you captured during the war? no
18. If so, when, and where? In what prison were you held and when were you released?
19. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1908? (Make list by items and value, and where situated.)
1 House & lot in Bolton \$1000.00
20. What property of any kind have you disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? part of lot to my son-in-law for \$500.00 to build pump for the house
21. 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.)
one House & lot in Bolton \$1000.00
22. What annual or monthly income or earnings of yourself and the source derived have you? renting about \$100.00 rent from a land
23. Are you drawing a pension of any amount from this State or the United States? no
24. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? no

Sworn to and subscribed before me, this the

20 day of Oct 1918
Wm. Robinson G. S. Ordinary
of Fulton County.

J. M. McAdams

Confederate

Soldier's Application.

UNDER ACT 1910.

County Fulton

Name J. M. McAdams

Company B

Regiment 100th Cavalry

Approved

J. W. LINDEY,
Commissioner of Pensions.

JOHN F. STEIN, State Printer, Atlanta.

11/3-1110

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Fulton County.

H. E. Starnes of said State and County, is hereby presented as a witness in support of the application of J. M. Adams 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? H. E. Starnes
78 Grant St Atlanta Ga
2. How long and since when have you known 50 years the applicant?
3. Where does he now reside, and since when has he been a bona fide, continuous resident in this State and how do you know? Bolton all his life. I have known him for the last 50 years
4. When, where and in what Company and Regiment did J. M. Adams enlist during war from 1861 to 1865? (Give date and place). Enlisted in 1864 in 69th Mass Bolton
5. How did you obtain your information of this Service? Served with him in same Co and Battalion
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date). from July 64 to Surrender in 1865
7. When and where was his Command surrendered or discharged (give date and place). Atlanta Ga. in April 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? at Surrender Where was his Command when he left it? Atlanta Ga for what cause did he leave? surrendered
By whose authority did he leave and how long was he granted leave? How do you know
all that you have stated to be true? If of your own knowledge (Tall clearly and specifically)
I served with him in the same Co & Reg
13. In what way was he prevented from returning to his Command? How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? No If so, when and where?
In what prison was he held? and when released

Sworn to and subscribed before me, this the 5th day of Oct 1915,
J. M. Robinson Clk. Ordinary,
of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.

Personally before me come Wm. Jeffries and J. M. Adams who on oath says that they are freeholders residing in said County and we know J. M. Adams the applicant for pension and we know the property that is now in the use, possession and control of himself and of the cash value to wit: (Make List by items and value.)
One house & lot

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items). One lot value at \$150
2. When and to whom was it sold or given to? R. B. Rogers
3. What was the price paid or stated to be paid? \$150
4. What relation is the party to applicant? son in law
5. What disposition was made of the proceeds of the sale? Paid on balance of house & lot
6. Was the disposition of this property made in good faith and full value? yes
or was it made to obtain a pension?

Sworn to and subscribed before me, this the 6th day of Oct 1915,
J. M. Robinson Clk. Ordinary, Wm. Jeffries
of Fulton County, J. M. Adams

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, Thos. H. Jeffries Ordinary of said County, certify that I know the applicant J. M. Adams for Pension is the person he represents himself to be and resides in said County. That I also know H. E. Starnes the witness swearing to the service and Wm. Jeffries 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 shows that J. M. Adams value for tax is in 1908 \$ 10.35 for 1909 \$ 12.50 for 1910 \$ 12.50 for 1911 \$ 10.35 for 1912 \$ 12.25 for 1913 \$ 12.25 for 1914 \$ 12.25 for 1915 \$ 12.25

Sworn under my hand and official seal of office this 7th day of Oct 1915,
Thos. H. Jeffries 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 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 affidavit of freeholders unnecessary.

STATE OF GEORGIA, Fulton County

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Mary F. M. Adams the applicant, and that she is the lawful widow of Y. M. Adams, and was on the 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 13 day of Sept 1921, there was due to him and unpaid his Pension of \$175.00 Dollars from the State of Georgia, and I know _____ the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 9 of Jan, 1922
(SEAL.) Thos H. Jeffries Ordinary
Fulton County.

Mrs Adams, Y. M.

Fulton County
1921

Application for Pension Due
Deceased Soldier
(UNDER ACT 1891)

(To be paid his Widow or Dependent Children)

BY

Mrs Mary F. M. Adams
Widow of Y. M. Adams
of Fulton County

Old or New

Date of Death Sept 13 1921

Approved and ordered paid

_____ 1921.

J. W. LINDSEY,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for review. When you pay out the money, send them return it with your pay-roll for permanent filing in the Pension Office.

Card ✓

GEORGIA, Floyd County, DeKalb

I hereby authorize and constitute Mr A. Helms, of DeKalb County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1921, through my deceased husband, Y. M. Williams, who was on Service Pension Roll and paid from Fulton County for 1920.

Witness my hand this 20th day of December, 1921.

Attest before me:

Harry Johnson atty in law
Ordinary, Floyd County, Georgia.

above applicant; that he knows that the said the applicant were in due form of law married in the County
and Paulding in the State of Georgia on
of the 29th day of January 1912, ~~and~~ and, and that they resided together
as husband and wife from date of marriage to the day of his death on the 13th day of
September, 19 21, and I know that she is his dependent widow.

Sworn to and subscribed before me this 20th day of December, 1921.
And I certify that the witness is credible and entitled to full
Harry J. Burton Ordinary, faith and credit
Floyd County, La. M. King
(SEAL.)

INSTRUCTIONS.
1st. This form can be used by guardian, or minor children, where there is no widow.
2nd. The Ordinary must, in all cases, send certificate of marriage attached hereto, if marriage is not proven by wit-
ness.
3rd. Avoid the use of the enormously large form of marriage certificate in common vogue throughout this State, suit-
able only for stamping. Such a certificate is entirely too bulky for use in any sort of pension paper.
4th. This form is for widows of deceased soldiers who died after October 31st, and for widows and dependent children
of service soldiers who died after November 1st.
5th. The Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals
affixed, and that the form, when folded, is filed out.
6th. Pay out no money on this application until it is approved in the Pension Office, and returned to you as your
authority to make the payment.
7th. Return this application with your final settlement to the Pension Office.
8th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
9th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
10th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
11th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
12th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
13th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
14th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
15th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
16th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
17th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
18th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
19th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.
20th. The widow shall pay out for the pension of her husband, signing her name opposite his name thereon.

McGee, Nannie (Mrs)
Fulton County
OK for 1925
WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right
 When Husband Was on the Pension
 Roll of Georgia

County *Fulton*
 Name *Mrs Nannie McGee*
 Widow of *Wm H McGee*
 Company *Philippa regt*
 Regiment
 Date of Husband's Death *Nov* 1915
 Date of Marriage *Jan* 1874
 Approved *Feb. 4, 1925*

N. E. King
 Commissioner of Pensions.

10-21-1924

STATE OF GEORGIA,

Fulton COUNTY.

Ordinary's Certificate

I, *Wm H. McGee* the applicant for pension; that he is the person he represented himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know *Mrs Nannie McGee* the witness as to marriage, and that both 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.

Sworn under my hand and official seal of office this *14* day of *Sept* 1924
 (SEAL OF ORDINARY)
Wm H. McGee Ordinary
 of *Fulton* County

Instructions:

1. Before any questions are answered the Ordinary shall read 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 submit to me."
 Additional affidavits may be attached if such space are sufficient.
2. All affidavits must be made before the Ordinary of the County of residence.
3. The Ordinary shall read the questions and the answers to the questions.
4. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general service—because Disabled Pensioners make no proof of service and were not required to do so.
5. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service.

McClure, Nellie Mae
Fullon County
OK for 1923

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right
 When Husband Was on the Pension
 Roll of Georgia

County *Fullon*
 Name *Mrs. Nellie Mae*
 Widow of *H. H. Coffey*
 Company *Phillips & Leggett*
 Regiment
 Date of Husband's Death *Nov 1915*
 Date of Marriage *June 1874*
 Approved *Feb. 4, 1925*

N. E. [Signature]
 Commissioner of Pensions

10-21-1924

Ordinary's Certificate

STATE OF GEORGIA.

Fullon COUNTY.

I, *Wm. H. Jeffries*, Ordinary of said County, certify that I know
Mrs. Nellie Mae the applicant for pension; that he is the person he repre-
 sents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since
 January 1st, 1920; that I also know *Wm. H. Coffey*, the witness as to
 marriage, and that both 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.

Sworn under my hand and official seal of office this *24* day of *Oct* 19*24*

(SEAL OF ORDINARY.)

Wm. H. Jeffries Ordinary
 of *Fullon* County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
 "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you
 give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are sufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general
 reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's
 service—because Disabled Pensioners made no proof of service and were not required to do so.

STATE OF ALABAMA)
Calhoun County)

August 21st, 1924.

The affiant Mrs Florence Hines of 245 Mountain Avenue, Jacksonville, Alabama, deposes and says that she was Present at the Marriage of Miss Nannie Woods to W. H. McAfie on January 29th, 1924, as an Attendant.

Mrs Florence Hines

Subscribed and Sworn to before
me this 21st day of August 1924.

Anne F. Rowan
Notary Public, Calhoun County, Alabama.

39 Olympic Way
APPLICATION FOR PENSION BY A WIDOW
Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be
Used by the Widow of a Disabled Soldier Pensioner.)

STATE OF GEORGIA,

Fullon COUNTY.

Personally before me comes Mrs Nannie McAfie of said County, who, after having been duly sworn, says that she is the widow of W. H. McAfie to whom, in the County of Calhoun State of Ala she was married on the 29 day of Jan 1924 and that she remained his wife, and resided with him to the date of his death in Nov 1923 and that she has not since his death remarried; at the time of his death he was a resident of Fullon County, in said State of Georgia, and he was on the Fullon Pension Roll of the State and paid a pension of \$6.00 in Fullon County for 1924 (per annum), on account of being a soldier in Company Phillips Regiment Regiment (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia, and she has, continuously, resided there since Jan day of January 1924.

Sworn to and subscribed before me, this the
15 day of Oct 1924 } W. H. McAfie
Arthur R. Marshall Ordinary } Applicant
of Fullon County }

(SEAL OF ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband
STATE OF GEORGIA,

Fullon COUNTY.

Personally before me comes Mrs Florence Hines known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs Nannie McAfie, who made the foregoing affidavit, is the lawful widow of W. H. McAfie who died in Fullon County in said State of Ala on the 26 day of Nov 1923, and that she has not since married; that she became the wife of W. H. McAfie on the 29 day of Jan 1924; that she and he had resided together as husband and wife, continuously, since to date of his death and that he was the same man who was on the pension roll of said State of Georgia from Fullon County Fullon when he died.

Sworn to and subscribed before me, this the
15 day of Oct 1924 } Mrs Florence Hines
Arthur R. Marshall Ordinary }
of Fullon County }

(SEAL OF ORDINARY.)

affidavit, is the lawful widow of John who died on the 18 day of Nov, 1915, and
County in said State of Ala on the 16 day of Nov, 1915, and
that she has not since married; that she became the wife of John on
the 18 day of Nov, 1915; that she and he had resided together as husband
and wife, continuously, since to the date of his death and that he
was the same man who was on the pension roll of said State of Georgia from June 1st
County Ala when he died.

Sworn to and subscribed before me, this the
15 day of Oct, 1924 }
William R. Marshall Ordinary } Ms Florence Smith
of Calhoun County }

(SEAL OF ORDINARY.)

POWER OF ATTORNEY.

Form 6.

STATE OF GEORGIA.

Know all Men by these Presents, That I _____
County _____

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 _____ 1893.

Executed in the presence of us:

[L. S.]

DIRECTION.

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

The purpose of this power of attorney is to enable me to receive the money which I am 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.
Rich Johnson
Sic

Soldier's Pension
1893.

Name *Thomas V. Lee*

County *Antion*

Disability *Arm*

Amount \$ *50*

4/10
Rich Johnson
Capt. Johnson



PHYSICIAN'S AFFIDAVIT.

STATE OF GEORGIA,
Fulton County.

PERSONALLY comes before me W. L. Calhoun Ordinary of said County, W. L. Durham and W. A. Smith, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have carefully examined Thomas V. McAffee and after such personal examination say that the applicant has been injured as follows:

On the 14th day of May 1863, he was shot in the right shoulder by a Minnie Ball cartridge, the bullet entering the bone and passing through the muscles of the arm, with partial paralysis of the same, rendering him unfit for manual labor.

We have treated applicant professionally for

Sworn to and subscribed before me this

25th day of March 1893

W. L. Calhoun

Ordinary.

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

NOTE 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier. Also state how long physicians have known and treated applicant.

STATE OF GEORGIA,

Fulton County.

I, W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with Thomas V. McAffee the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents himself to be, and that he resides in this County. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief.

Given under my official signature and seal this 25th day of March 1893

W. L. Calhoun

Ordinary Fulton County.

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears Thomas V. McAffee 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 continuously since the 20th day of

April 1862, that he enlisted in the military service of the Confederate States (or the State of Georgia) during the war between the States, and served as a Sergeant in Company C, of 58th Regiment of Georgia Volunteers Burtis Brigade; that whilst engaged

in such military service, at the battle of Baker's Cross in the State of Mississippi, on the 14 day of May 1863, he was disabled as follows:

gunshot wound of the upper left arm. The ball entered the arm below the shoulder joint, passing down the bone for six or more inches, shattering the bone, and much of the bone splashed off, with lacerating of part of the muscles of the part, leaving the arm in such condition as to prevent him from doing manual labor, and suffering to this day with pain in the arm.

Deponent desires to participate in the benefits of the Act approved October 24th, 1887, and the Acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder, ending October 26th, 1893.

Sworn to and subscribed before me this the

25th 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. If claim is based on disease, give full and connected history of disease, tracing it directly to the service.

NOTE.—Do not trouble to mention wounds which do not disable.

Affidavit for Witnesses.

STATE OF GEORGIA,

County of Fulton }

PERSONALLY appears before me, the undersigned, Ordinary in and for said County,
Wm. Anderson and

each of whom, being duly sworn according to law,

severally say, under oath, that they are personally well acquainted with Thomas

D. McHye whose application is herewith presented for a pension,

and that they served with him in the army, and from our personal knowledge he was injured by

the service as follows: (give full statement, and tell in your own language how badly applicant is

disabled from work. If he does any labor, or can do any, state what.)

that on the 16th day of May
 1863, at the Battle of Baker's Creek
 in the State of Mississippi
 Thomas D. McHye was so wounded
 by a Minnie ball in the left
 arm, disabling him from
 rendering it suitable for man-
 ual labor, and has continued
 in such condition to this day.
 Thomas D. McHye says he is present
 in Co. C. 52 In. Regt. Volunteer

We personally know above stated facts. We were with him in the army and have known
 him ever since. Applicant is permanently disabled as stated and has been so to our certain
 knowledge ever since 18. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me this

25th day of March 1890

W. B. Cochran

ORDINARY.

NOTE.—The Ordinary will see that the full text of the Affidavit is understood by the witnesses, and that they are legally
 qualified to the same.

2. Witnesses are asked to make their statements full and explicit.

1005 B. 116

No. _____

INDIGENT PENSION
1897.

Name _____

County _____

Approved _____ 1897.

WARRANT HANDLED TO _____

July 7 1897 3/10/98

Pension Office 5/21/897
Infirmity is not well established in answer to No. 9 on also physician affidavit Rich of Pines
Pension Office 8/19/898
The statute requires that applicant - his friends & the physician show an inability to earn a support at any time of labor or occupation, and this has not been done. Proof must be for this Rich of Pines
Comm of Pines

Questions for Applicant.

STATE OF GEORGIA,

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

1. What is your name and where do you reside? (Give State, County and post office)
Thomas V. McAffee Sullivan Co. Ga.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
Sullivan Co. Ga.
3. When and where were you born?
March 1842 Sumpter Co. Ga.
4. When and where and in what company and regiment did you enlist or serve?
March 4 1862 Franklin Co. Ga.
5. How long did you remain in such company and regiment?
May 16th 1863 was wounded in the leg
6. For how long a period did you discharge regular military duty?
1862-1863
7. When, where and under what circumstances were you discharged from service?
At the close of hostilities. Was on a furlough, was on my way back to my Co. when I was discharged.
8. What is your present occupation?
Trader
9. How much can you earn (gross) per annum by your own exertions or labor?
proceed
10. What has been your occupation since 1865?
Trader
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"?
Infirmity 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?
May 16-1863 at Cedar Creek Miss was wounded by a ball in left shoulder about 2 inches below joint. Shattered the bone & has not been able to use it since.
13. What property, effects or income do you possess and its gross value?
None
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same?
None
15. In what County did you reside during those years and what property did you then return for taxation?
Sullivan None
16. How were you supported during the years 1895 and 1896?
partly by my own efforts & by my son & wife
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?
perhaps \$100 partly by my son & wife
18. What was your employment during 1895 and 1896? What pay did you receive in each year?
Trader Not over \$6
19. Have you a family? If so, who composes such family? Give their means of support.
Have three children. Wife takes boarders & runs small business for support. Children are at school.
20. Are you receiving any pension, if so what amount and for what disability?
No.

Sworn to and subscribed before me this the
6th day of July 1897.
W. H. Kelley Ordinary.
of Sullivan County.

Thomas V. McAffee
Applicant.

Every Question MUST be Answered.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me, W. H. H. H. H. and W. H. H. H. H., both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully Thomas M. Anderson, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

*Gunshot wound
penetrating the back for 34 inches deep, entering
the outer part of the bone which has resulted in a deeply inflamed
condition of the bone with partial paralysis of the lower extremities.*

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 6th day of June, 1897.

W. H. H. H. H. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, W. H. H. H. H. Ordinary in and for said County, hereby certify that the applicant Thomas M. Anderson resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: W. H. H. H. H. and W. H. H. H. H. 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, none dollars of property, and in 1896, none dollars of property.

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

Witness my hand and seal of office, this 7th day of June, 1897.

W. H. H. H. H. 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.

William M. Anderson, of said State and County, having been presented as a witness in support of the application of Thomas M. Anderson 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? William M. Anderson
Atlanta Fulton Co. Ga.

2. Are you acquainted with Thomas M. Anderson, the applicant, is of how long have you known him? I am about 37 yrs.

3. Where does he reside, and how long has he been a resident of this State?

Atlanta Fulton Co. Ga. about 37 yrs.

4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I do. He served in my company.

5. When, where and in what company and regiment did he enlist? March 4 - 1862
Kathlamet Co. Ga. Co. "C" 52nd Ga.

6. Were you a member of the same company and regiment? yes

7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About
a year, little over. He was a brave
faithful soldier. He was wounded at
Sherman's march. I was charged before he retired.

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

No property. Very little income.

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? None

10. What is the applicant's occupation and physical condition? His physical
condition is very poor on account
of his old wound.

11. Is the applicant unable to support himself by labor of any sort, if so, why? I believe
him to be unable to support
himself by labor of any kind.

12. How was he supported during the years 1895 and 1896? Mostly by
his son.

13. What portion of his support for those two years was derived from his own labor or income?

Not over 60 a year. I should think,

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He was wounded in
left shoulder & that arm gives him
trouble & makes it impossible to work much.

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

Sworn to and subscribed before me, this

the 6th day of June, 1897.

W. H. H. H. H. Ordinary.

William M. Anderson
Witness.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, Thomas V. McCoy hereby authorize

of Fulton

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 May 22 1900.

Thomas V. McCoy [L. S.]

Executed in presence of

W. H. Murray
Grain

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

CODE SECTION 190
(For Those Already Enrolled.)

No. 478

INVALID

SOLDIER'S PENSION.

1900.

Name Thomas V. McCoy

County Fulton

Residence St. Marys, Fla.

Amount, \$ 50.00 Dollars

Warrant issued May 15 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. H. Murray

One W. H. Murray, State Prison, Atlanta.

CODE SECTION 190
(For Those Already Enrolled.)

No. 296

DISABLED

SOLDIER'S PENSION.

1901.

Name T. V. McCoy

County Fulton

Disability Gravely Anno

Amount, \$ 50

May 16 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. H. Murray

One W. H. Murray, State Prison, Atlanta.

W. H. Murray

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Thomas D. McFar 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 19 day of March 1842; 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 Sergeant in Company 6, of 62th Regiment of Ga Volunteers, Shrall's Brigade; that whilst engaged in such military service in the State of Miss, on the 16 day of May 1863, he was wounded, injured or diseased as follows:

Gun shot wound in left

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1900. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of Fifty Dollars, for the year 1889.

Sworn to and subscribed before me, this, the Thomas D. McFar day of May 1900. POST OFFICE Atlanta 222.

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

Given under my official signature and seal, this 22 day of May 1900.



Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Thomas D. McFar 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 19 day of March 1842; 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 Sergeant in Company 6, of 62th Regiment of Ga Volunteers, Shrall's Brigade; that whilst engaged in such military service in the State of Miss, on the 16 day of May 1863, he was wounded, injured or diseased as follows:

Gun shot wound in left arm

Deponent makes application for the pension to which he is entitled for year ending October 29th, 1901. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of Fifty Dollars, for the year 1889.

Sworn to and subscribed before me, this, the Thomas D. McFar day of May 1901. Postoffice Atlanta Ga.

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

Given under my official signature and seal, this 22 day of May 1901.

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

(FOR THOSE ALREADY ENROLLED)

No. 199

DISABLED

SOLDIER'S PENSION
1902.

Name *J. V. McAfie*
County *Fulton*

Co. *49* Regiment *2nd Yfa*

Disability *wounded arm*

Amount, \$ *50.00*

1/2 1902.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

pph

JOHN W. LINDSEY, State Printer, Atlanta.

no data

*McAfie, J. V.
Fulton Co., Ga., 1/2*

(FOR THOSE ALREADY ENROLLED)

No. 108

DISABLED

SOLDIER'S PENSION
1903.

Name *J. V. McAfie*
County *Fulton*

Co. *49* Regiment *2nd Yfa*

Disability *wounded arm*

Amount, \$ *50.00*

1/2 1903.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

pph

JOHN W. LINDSEY, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

hereby authorize

of

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

by

at

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

day of

1903.

[L. S.]

Executed in presence of

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears J V McAfee 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 19th day of March 1862; 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 Sergeant in Company C, of 52-th Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 16th day of May 1863, he was wounded, injured or diseased as follows:

Wounded in left arm

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, 1902. 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,

County.

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

Given under my official signature and seal, this 1st day of Jan, 1902.



John P. Wilkinson Ordinary of said County, 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,

County.

Personally appears J V McAfee 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 19 day of March 1862; 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 Sergeant in Company C, of 52-th Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 16 day of May 1863, he was wounded, injured or diseased as follows:

Wounded left arm

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 1st day of Jan, 1903. 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,

County.

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

Given under my official signature and seal, this 1st day of Jan, 1903.



John P. Wilkinson Ordinary of said County, 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

1004 SECTION 1200.

(FOR THOSE ALREADY ENROLLED.)

No. 104

DISABLED

SOLDIER'S PENSION
1904.

Name *T. O. Mc-Caffer*
County *Fulton*
Co. *C* Regiment *32 Ga*
Disability *anemia & nerve*
Amount, \$ *4.15* 1904.

JOHN W. LINDSEY

Commissioner of Pensions

WARRANT HANDLED TO

Geo. W. Harrison, Vice Printer, ALBANY

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

I,

hereby authorize

of

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

by

at

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

day of 1905.

[L. S.]

Executed in the presence of

1005 SECTION 1200.

(FOR THOSE ALREADY ENROLLED.)

No. 154

DISABLED

SOLDIER'S PENSION
1905.

Name *Thos. V. Mc-Caffer*
County *Fulton*
Co. *C* Regiment *52 Ga.*
Disability *disabled arm*
Amount, \$ *50.00* 1905.

JOHN W. LINDSEY

Commissioner of Pensions

WARRANT HANDLED TO

L. S.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears *T. V. McAffe* 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 *19* day of *March* 18*72*; 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 *Sgt* in Company *Co* of *252* in the Regiment of *Sea* Volunteers *Stovall's* Brigade; that whilst engaged in such military service in the State of *Miss*, on the *16* day of *May* 186*3*, he was wounded, injured or diseased as follows:

Wound left arm

Deponent makes application for the pension to which he is entitled for the year ending October 25th, 1904. I have heretofore, under said law, as a resident of *5-00* *Fulton*. County, been allowed an invalid pension of *5-00* Dollars, for the year 1903.

Sworn to and subscribed before me, this the *21* day of *JAN* 1904, *1904* *T. V. McAffe* Post-office

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

STATE OF GEORGIA,
Fulton. County.

I, *John R. Wilkinson*, Ordinary of said County, do certify that I am well acquainted with *T. V. McAffe* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *Thos. V. McAffe* 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 *19* day of *March* 18*72*; 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 *Sergeant* in Company *Co* of *252* in the Regiment of *Sea* Volunteers *Stovall's* Brigade; that whilst engaged in such military service in the State of *Miss*, on the *16* day of *May* 186*3*, he was wounded, injured or diseased as follows:

Disabled arm Buckner Creek

Deponent makes application for the pension to which he is entitled for the year ending October 25th, 1905. I have heretofore, under said law, as a resident of *5-00* *Fulton*. County, been allowed an invalid pension of *5-00* Dollars, for the year 1904.

Sworn to and subscribed before me, this the *21* day of *JAN* 1905, *1905* *T. V. McAffe* Post-office *222 E. 1st*

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 *Thos. V. McAffe* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this *21* day of *JAN* 1905, *1905*



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 *Thos. V. McAfee* 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 *19* day of *March* 18*62*; 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 *Sgt* in Company *B*, of *23rd* Regiment of *Volunteers* *Stovall's* Brigade; that whilst engaged in such military service in the State of *Miss*, on the *16* day of *May* 186*3*, he was wounded, injured or diseased as follows:

Wound left arm

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 *Fulton* County, been allowed an invalid pension of *50* Dollars, for the year 1903.

Sworn to and subscribed before me, this the

day of *JAN 21* 1904 1904.

John R. Wilkinson Post-office *222 E. 1st*

STATE OF GEORGIA,

Fulton County.

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

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 *Thos. V. McAfee* 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 *12* day of *March* 18*42*; 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 *Sergeant* in Company *B*, of *23rd* Regiment of *Volunteers* *Stovall's* Brigade; that whilst engaged in such military service in the State of *Miss*, on the *16* day of *May* 186*3*, he was wounded, injured or diseased as follows:

Disabled arm Baker Creek

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 *Fulton* County, been allowed an invalid pension of *50* Dollars, for the year 1904.

Sworn to and subscribed before me, this the

day of *JAN 2* 1905 1905.

John R. Wilkinson Post-office *222 E. 1st*

STATE OF GEORGIA,

Fulton County.

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

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 _____ 1906.

[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 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 _____

McAfee, Thomas V.

Fulton Co.

(FOR THOSE ALREADY ENROLLED.)

C-52 No. 183

DISABLED
SOLDIER'S PENSION
1906.

Name *Thomas V. McAfee*

County *Fulton*

Co. *B*

Regiment *58th Ga*

Disability *Arm disabled*

Amount, \$ *30.00*

1/10 1906

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO *McAfee*

FOR THOSE ALREADY ENROLLED.

McAfee, Thomas V.

Fulton Co.

(FOR THOSE ALREADY ENROLLED.)

No. *107*

DISABLED
SOLDIER'S PENSION
1907.

Name *Thomas V. McAfee*

County *Fulton*

Co. *B*

Regiment *58th Ga*

Disability *Arm*

Amount, \$ *30.00*

1/7 1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO *McAfee*

FOR THOSE ALREADY ENROLLED.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears Thos. V. McAffee 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 17 day of March 1862, 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 5th Regiment of Volunteers Storall's's Brigade; that whilst engaged in such military service in the State of Georgia, on the 16 day of May 1862, he was wounded, injured or diseased as follows:

Disabled Arm, Baker Creek,

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 1906.

Sworn to and subscribed before me, this the 1st day of JAN 1906.

John R. Wilkinson

Post-Office Atlanta

Now.—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 Thos. V. McAffee the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1906.

John R. Wilkinson
Ordinary Fulton County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears Thos. V. McAffee 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 17 day of March 1862; 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 5th Regiment of Volunteers Storall's's Brigade; that whilst engaged in such military service in the State of Georgia, on the 16 day of May 1862, he was wounded, injured or diseased as follows:

Disabled Arm, Baker Creek

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 1st day of JAN 2- 1907.

John R. Wilkinson

Postoffice Atlanta

Now.—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 Thos. V. McAffee the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1907.

John R. Wilkinson

Ordinary Fulton County.



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

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Fulton County, Georgia 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) Thomas Virgil McAdoo, Atlanta Fulton
2. How long and since when have you been a continuous resident citizen of this State? 72 years
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Army of the Confederate States
4. When and where, and by what Company and Regiment did you enlist? (Give the arm and class of Service) Washington Co. Meigs Co. Co. 52 Ga. Infantry
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) until the surrender of Vicksburg
6. When and where, and by what Company and Regiment surrendered or discharged from the Service? the whole garrison at Columbus Ga. on further terms
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 home in White County on furlough
 - a. Where was your Command when you left it? Columbus Ga
 - b. When did you leave the Command? April 1863
 - c. For what cause did you leave? on furlough
 - d. By whose authority did you leave? by authority of the commanding officer
 - e. For how long was your leave granted? In what way? 12 days
 - f. Why did you not return to your Command after leave expired? cause of surrender
 - g. In what way were you prevented? X
 - h. What effort did you make to return? X
 - 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? Baker's Creek, Miss. was paroled
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? Yes \$3.00 a year
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 18th day of Aug 1913 at Atlanta County, Georgia

Handwritten notes:
 Sgt. McAdoo, Thomas V.
 born May 16, 1843
 died Nov. 16, 1913
 at 72 years old
 at 72 years old
 at 72 years old

Confederate

Soldier's Application.

UNDER ACT 1910.

Name: Thomas V. McAdoo
 Company: E
 Regiment: 52 Ga

Approved: J. W. LINDSEY
 Commissioner of Pensions

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Fulton County.

I Alex Church of said State and County is hereby presented as a witness in support of the application of O. K. Meigs 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? Alex Church reside in Fulton County
2. How long and since when have you known [redacted] the applicant? Fifty years or more
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? in Atlanta 20 years from having known him for many years
4. When, where and in what Company and Regiment did [redacted] enlist during war from 1861 to 1865? (Give date and place). in Troup Co. Ga. Some Regiment 529 Ga.
5. How did you obtain your information of this Service? By seeing in the
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date). From March 1st 1861 to June 1st 1862
7. When and where was his Command surrendered or discharged (give date and place). in Charlotte at close of the war
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there? at home in Swainsboro
10. Was the applicant personally present with his Command at surrender? Yes
11. If not where was he and how came him there? at home in Swainsboro
12. When did he leave his Command? I do not know Where was his Command when he left it? at Columbia For what cause did he leave? Swainsboro By whose authority did he leave? Commanding officer and how long was he granted leave? I do not remember How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically). By having been personally acquainted with him
13. In what way was he prevented from returning to his Command? By being cut off How do you know? I was also cut off at the time
14. What effort did he make to return to his Command and how do you know? I don't know more than this, he and I started and told so
15. Was applicant captured as a prisoner? Yes If so, when and where? at Rock Creek In what prison was he held? Swainsboro and released when released about this 1st of March 1863

Sworn to and subscribed before me, this the 27 day of May 1913 Alex Church Ordinary of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.

Personally before me comes Robert Church who on oath says that they are freeholders residing in said County and we know Thos. V. McRae 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.)

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) Nothing
 2. When and to whom was it sold or given to? Nothing
 3. What was the price paid or stated to be paid? Nothing
 4. What relation is the party to applicant? Nothing
 5. What disposition was made of the proceeds of the sale? Nothing
 6. Was the disposition of this property made in good faith and full value? or was it made to obtain a pension? Nothing
- Sworn to and subscribed before me, this the 27 day of May 1913 John R. Williamson Ordinary of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.

I, John R. Williamson Ordinary of said County, certify that I know the applicant Thos. V. McRae for Pension is the person he represents himself to be and resides in said County. That I also know Alex Church the witness swearing to the service and Robert Church 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 shows that Thos. V. McRae and wife value for tax is in 1908 \$ None for 1909 \$ None for 1910 \$ None for 1911 \$ None for 1912 \$ None for 1913 \$ None Sworn under my hand and official seal of office this 27 day of May 1913 John R. Williamson 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 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 such oaths 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.

more than one, he and I started and told as
 15. Was applicant captured as a prisoner? *yes* If so, when and where? *at Parker Creek*
Miss. In what prison was he held? *prisoners and treated when released*
about the 17th March 63
 Sworn to and subscribed before me, this *3rd* day of *May* 1863
John R. Robinson Ordinary
Franklin County

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

C. D. PHILLIPS,
 ATT'Y-AT-LAW
 MARIETTA, GA.

*Enclosed, please find C.D. Phillips a
 resident of Marietta Cobb County
 who after being sworn says that he was
 the Capt of the 5th Co. of the 1st Regt of Voluntary
 Militia of Ga. and that R. R. Ashby was Capt of Co. C
 in said Regiment. I know that
 R. R. Ashby was a member of
 said Company. Defendant was captured
 at the battle of Parker Creek, and
 did not see Surgeon McKeen
 after that day, & did not know
 of his own knowledge of his condition
 until after the close of hostilities,
 when it was ascertained that he was
 wounded as stated in his application
 for service. C.D. Phillips
 Sworn to before me this *3rd* day of *May* 1863
W. H. Mackgowny a/c*

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA.

White County.

PERSONALLY came before me *Rufus W. Ashby* of the county
 of *White* State of Georgia, who, being duly sworn, says that he was
 a commissioned officer in Company *C* of *52nd* Regiment of *Georgia*
 Volunteers, and that deponent knows *J. V. McKeen*, 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. V. McKeen*, as stated by him in said
 affidavit. Deponent further states that said *J. V. McKeen* is a bona fide
 citizen of this State, and resides in *Decatur* county. *Ga*
 Sworn to and subscribed before me, this *3rd* day of *January* 1888

W. H. Bell
Ordinary White County
R. R. Ashby
C. C. 52nd Regt Va

fatal after the close of hostilities,
He then ascertained that he was
wounded as stated in his applica-
tion for pension. } C. D. Phelps
Sworn to before me by } Col. G. K. Vol
282, 1875 }
W. H. Montgomery, cfe.

STATE OF GEORGIA

Fallows

PERSONALLY COMES before me

J. E. Dixon and *W. D. Smith* Ordinary of said county,
both known to
me as reputable physicians of said county, who being severally sworn, say on oath that they have
carefully examined *J. D. McArthur* and after such examination say that the
applicant has been injured to the extent claimed by him, and that he has been rendered permanently
and practically incompetent for the performance of ordinary manual labor by reason of said wounds
(*McArthur*) and that, in our opinion, applicant is entitled to the benefits allowed under the Act, approved
October 24, 1887, for the relief of the disabled.

Sworn to and subscribed before me, this

14 day of January, 1888

W. H. Montgomery

ORDINARY.

W. A. Smith

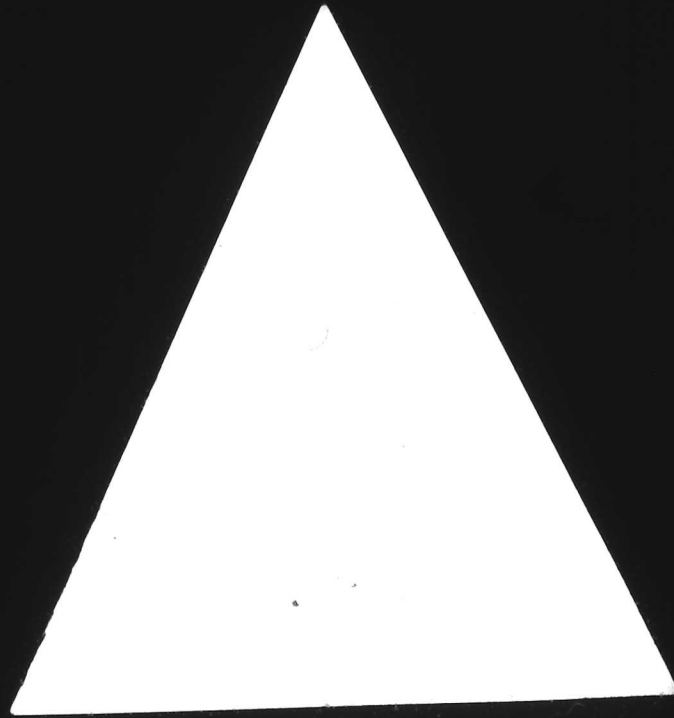
White County
COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA,
White County.

PERSONALLY came before me *Stephen W. DeLong* of the county
of *White* State of Georgia, who, being duly sworn, says that he was
a commissioned officer in Company *C* of *32nd* Regiment of *Georgia*
Volunteers, and that deponent knows *J. V. McKeen*, 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. V. McKeen*, as stated by him in said
affidavit. Deponent further states that said *J. V. McKeen* is a *bona fide*
citizen of this State, and resides in *Decatur* county.

Sworn to and subscribed before me, this *3rd* day of *January* 188*8*
W. B. Bell
Commissionary White Co. Ga. *R. R. Ashby*
Co. C. 52 Regt. Va. Inf.

The foregoing affidavit, in regard 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 oath of three responsible citizens should be furnished.



STATE OF GEORGIA.
POWER OF ATTORNEY.

I, _____
of _____
do hereby authorize _____
to receive and receipt for the pension allowed and request that he remit same to _____
at _____ day of _____ 1908.
Witness my hand and seal, this _____ day of _____ 1908.
Executed in presence of _____
[L. S.]

Montgomery, William
Fullon C.

No. *2*
Feb 1908

INDIGENT PENSION.
1908

Name *W. H. H. H. H.*
County *Fullon*
Philip L. L. L. L.
Approved _____ 1908

JOHN W. LINDSEY,

Commissioner of Pensions.
Fullon
WARRANT HANDED TO *3*

Ordinary will write name of applicant, County and Pensions on back as indicated above.

Doc. 2. Standard, State Printer, Atlanta, Ga.

7/24/08

STATE OF GEORGIA.

Robert A. Evans of said State and County, having been presented
as a witness in support of the application of William H. McFarlane for position
under section 1284, Code, and after being duly sworn true answers to make to the following questions, depose and
answer as follows:

11. What property, effects or income has the applicant? (Give your means of knowledge.)
Do not know
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907,
Do not know
- and what disposition, if any, did he make of same? *Do not know*

18. Has he conveyed away any of his property in the last four years? If so, what was it, and to whom?
the content by deed of all of his property consisting of 128 acres in the State of Texas for \$36,000 dollars.
19. What is the applicant's occupation and physical condition?
has had no regular occupation and his physical condition is such that he cannot work.
20. Is the applicant unable to support himself by labor of any sort? If so, why?
yes, by reason of age & hardships undergone during the war.
21. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?
as above
22. What portion of his support for these four years was derived from his own labor or income? *\$6.00 per month for 1908 and he made his own support for 1908-2.*
23. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code.
as above in 18.
24. Who compose family? What property have they? Children's age and their earning capacity?
his family consist of 3 boys and 1 girl of whom are married and making their own support.
25. What interest have you in the recovery of a pension for this applicant? *none*
Sworn to and subscribed before me, this 4th

STATE OF GEORGIA.

Personally seen before me A. D. Hannah M.D. and
W. B. Selyer M.D., both known to me as reputable physicians
of said County, who being severally sworn, say on oath that they have examined carefully William
Mazaffer, applicant for pension under Section 1284, Code, and after
such personal examination say that his present physical condition is as follows:
Infirmity and old age. He is unable
to gain of livelihood

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

Sworn to and subscribed before me, this 1st

10 day of 1991 100

Wm. K. McKim

7-11-50

STATE OF GEORGIA.

I, John K. Wertheim Ordinary, in and for said County, hereby certify that on applicant Wm. H. Mc Affee resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 190____ and that the witness, Almon A. Evans & Geo. Boyd

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

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

I further certify that the tax digest of _____ County shows that applicant
returned for taxation in his name in 1901 _____ Dollars of

property, and in 1902 _____ Dollars of property: in 1908 _____

Dollars of property: in 1904

Dollars of property: in 1905

Dollars of Property in 1905

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 10th day of September, 1908

John Archison Ordinary.

of Trinity County.

NOTE.

worded: "You shall give answers to each of the questions asked of you, and the evidence you shall give will be

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

ABOVE: 251 SUT.

has been subject to ~~disability~~ ~~and~~ ~~no~~ ~~regular~~
condition is such that he cannot work.

15. In the applicant unable to support himself by labor of any sort? If so, why? Yes, by reason of age & hardships undergone during the war.

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

17. What portion of his support for these four years was derived from his own labor or income? \$6.00 per week for 1903 and he made his own support for 1904-2-

18. Give a full and complete statement of the applicant's physical condition and certify him to a pension under Section 1254, Code as provided in law

19. Who compose family? What property have they? Children's ages and their earning capacity? His family consist of a young son of whom are given and receiving their own support

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 Sept, 1908, at John Breckinridge Ordinary.

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 _____ and I am of full faith. Witness my hand and seal of office, this 10th day of September, 1908.

John Breckinridge Ordinary of Julien County.

Before any questions are answered, the Ordinary shall swear applicant, and the witnesses in the following words: "You shall give answers truth 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 obtained if blank spaces are insufficient.
In every case the Ordinary must comply to the character of the witness, and as to the execution of the proof as above set out.

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

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a proper statement in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for a crippled *hand*, nor for a crippled *foot*, nor for an arm or leg, unless the arm or leg has been rendered *substantially and essentially* useless.
3. It will not answer to say that an arm is substantially useless for ordinary purposes of life, etc. The law requires that it be rendered *substantially and essentially* useless for 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 require the constant use of crutch or stick, that the leg is not "substantially and essentially" useless, and "essentially" useless. The words are strong ones, however, and the injury must be very severe, and the arm in a badly damaged condition to entitle one to the allowance mentioned in the Act. The Legislature intended to limit these payments to such as were *most severely wounded and disabled*. In the future they will doubtless provide for all who were badly injured, but the present law does not reach many worthy, heavy cases. It was designed to provide for the most severely wounded, and it will naturally become unpopular and be repealed.
5. If papers are returned for correction, and amendments are *added* to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.
6. It is suggested that the condition of applicants better than the Governor or his Secretaries, and they are earnestly requested to discourage any man from making application unless he is entitled under the law. Hundreds of applications have been received and disallowed because they were not disabled so as to entitle them under the law. This entails much unnecessary work upon this office; it causes delays in making payments to those who are entitled; it puts parties to expense and trouble; and in the end every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

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

McAlister, A. J.
263
McAlister, A. J.
Fulton Co.

No. 936

Application for Allowance

FOR

Loss of Left Eye

Applicant A. J. McAlister

County Fulton

Amount \$10

Date of Warrant May 14/88

Entered on Record

May 14 1888

Secretary Executive Department

NOTES.

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

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
 2. The law makes no allowance for a crippled hand, nor for a crippled foot, nor for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
 3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
 4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
 5. It is more difficult to say when an arm is "substantially and essentially useless." The words are strong ones, however, and the injury must be very severe, and the arm in a badly damaged condition to entitle one to the allowance mentioned in the Act. The Legislature intended to limit these payments to such as were most seriously wounded and disabled. In the future they will doubtless provide for all who were badly injured, but the present law does not reach many worthy, needy cases. It was inaugurated as an experiment; if abused, it will naturally become unpopular and be repealed. If properly administered, will do great good.
 6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made *and* *with* before an officer, and the proofs must show that the amendments have been duly sworn to.
 7. The Ordinaries know the condition of applicants better than the Governor or his Secretaries, and they are earnestly requested to discourage any man from making application unless he is entitled under the law. Hundreds of applications have been received and disallowed because they were not disabled so as to entitle them under the law. This entails much unnecessary work upon the office; it causes delays in making payments to those who are entitled; it puts parties to expense and trouble, and in the end causes bitter disappointment and mortification.
 8. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.
- The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

STATE OF GEORGIA,

Fullton County.

PERSONALLY appears *A. J. McWhiter* of *Fullton* 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 *27th* day of *August* 1838; 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 *1st Sergeant* in Company *E*, of *1st* Regiment of *Georgia Regulars* *Anderson's* Brigade; that whilst engaged in such military service, *near Centerville* in the State of *Virginia*, on the day of *December* 1861, he was wounded as follows: *Was injured while in active service at Fort Oglethorpe by some substance being thrown in his left eye while he was engaged in firing a cannon. Did not lose the sight of his eye at once, but inflammation set in and from that he lost his sight in his eye and from that time the sight of his right eye is greatly impaired so much so that he sees very indistinctly and only with the use of strong eye glasses.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and makes application for the allowance to which he is entitled thereunder.

Sworn to and subscribed before me, this the

14 day of *May* 1888

W. L. McWhiter

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,

Fullton County.

PERSONALLY came before me *J. M. Meyers* of the county of *Fullton*

State of Georgia, who, being duly sworn, says that he was a regular officer in Company *E*, of *1st* Regiment of *Georgia Regulars*, and that deponent knows *A. J. McWhiter*, 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 *A. J. McWhiter*, as stated by him in said affidavit. Deponent further states that said *A. J. McWhiter* is a *bona fide*

citizen of this State, and resides in *Fullton* county. *J. M. Meyers* later signed

Sworn to and subscribed before me, this *14* day of *May* 1888

W. L. McWhiter

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:

McWhiter, A. J.
263
Fullton Co.
Application for Allowance
FOR
Loss of Left Eye
Applicant A. J. McWhiter
County Fullton
Amount \$10.
Date of Warrant May 14/88
Entered on Record May 14 1888
W. L. McWhiter
Secretary Executive Department

STATE OF GEORGIA, }
County. }

PERSONALLY came

citizens of _____ county in said State,
who, being duly sworn, say that they are acquainted with

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

Sworn to and subscribed before me, this
day of _____ 1888

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

STATE OF GEORGIA, }
Fulton County. }

PERSONALLY comes before me *M. L. Latham* Ordinary of said county

W. A. Stiles and *John Pinkney*, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *A. J. McShane* and after such examination say that the applicant has been injured as follows:

The loss of the left eye and impairment of the other - As surgeon of Dept. He after discharge the said Dr. Stiles states that he issues a certificate of discharge for the said Dr. McShane on said injuries

Sworn to and subscribed before me, this
14th day of May 1888

M. L. Latham
ORDINARY

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

STATE OF GEORGIA, }
Fulton County. }

I, *M. L. Latham*

Ordinary of said county,

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

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

Given under my official signature and seal, this 14th day of May 1888

M. L. Latham
Ordinary Fulton County.

POWER OF ATTORNEY.

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 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 _____ 1888

[L. S.]

Executed in the presence of us:

W. L. C. Williams
W. L. C. Williams

No. *286*

APPLICATION FOR ALLOWANCE
THE WARS ENDING OCT. 26, 1889.

FOR

Lawrence E. Williams
 Applicant

Prall
 County

30
 Amount

Feb 9
 Date of Warrant

Feb 9
 Entered on Record

W. L. C. Williams
 Signature

No additional data applicable

STATE OF GEORGIA.

Dutton County.

PERSONALLY appears *A. J. McAlister* of *Dutton* 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 *27th* day of *August* 1888 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 *1st Sergeant* in Company *E*, of *1st* *Georgia* *Regiment* - *Auderson's* Brigade; that whilst engaged in such military service, at *Centerville* in the State of *Virginia* on the *day of* *December* 1861, he was wounded as follows: *Was injured while in active service at Centerville by one shot and being thrown in his left eye while engaged in firing a cannon: did not lose the sight of his eye at once, but inflammation set in and from this he lost the sight of his eye, and with sympathy the sight of his right eye is greatly impaired so much so that he sees very imperfectly, and only with the use of a glass.*

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

Sworn to and subscribed before me, this *9th* day of *February* 1889 *A. J. McAlister*
W. L. C. Williams

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

STATE OF GEORGIA.

Dutton County.

PERSONALLY comes before me *W. L. C. Williams* Ordinary of said county, *C. A. Stiles* and *Chas. H. Stiles* both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *A. J. McAlister* and after such examination say that the applicant has been injured as follows: *One loss of the left eye - and impairment of the other -*

A. J. McAlister of the *1st* *Georgia* *Regiment* was injured at *Centerville* while engaged in firing a cannon: did not lose the sight of his eye at once, but inflammation set in and from this he lost the sight of his eye, and with sympathy the sight of his right eye is greatly impaired so much so that he sees very imperfectly, and only with the use of a glass.

Sworn to and subscribed before me, this *9th* day of *February* 1889 *C. A. Stiles*
W. L. C. Williams
Chas. H. Stiles

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

NOTES.

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

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

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

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

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

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

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

STATE OF GEORGIA.

Fulton County.

I, *W. L. Galtman*, Ordinary of said county, do certify that I am well acquainted with *A. J. Galtman*, 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: *C. A. Stiles M. D.*

and *Chas. Pinckney M.D.*

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

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

Given under my official signature and seal, this _____ day of *February* 1889

W. L. Galtman
Ordinary *Fulton* County.

POWER OF ATTORNEY

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 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 _____ 1889

(L. S.)

Executed in the presence of us:

DIRECTION:

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

STATE OF GEORGIA,

Fuller County.

I, *W. L. Leatham* Ordinary of said county, do certify that I am well acquainted with *A. J. McWhorter* 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 6th day of *February* 1890

W. L. Leatham

Ordinary

Fuller

County.

1890.

McWhorter A. J.

No. *381*

APPLICATION FOR ALLOWANCE.

FOR THE YEAR ENDING DECEMBER 31, 1889.

Sum of One \$4.00

Applicant, *A. J. McWhorter*

County, *Fuller*

Amount, *30*

Date of warrant, *July 6/*

Entered on record, *July 6*

1890

W. L. Leatham

WARRANT RETURNED TO

Applicant

Fuller Co
McWhorter A. J.
1890.

PAID 1891

No. *105*

APPLICATION FOR ALLOWANCE

FOR THE YEAR ENDING DECEMBER 31, 1889.

Sum of One \$4.00

Applicant, *A. J. McWhorter*

County, *Fuller*

Amount, *30*

Date of Warrant, *July 6/*

Entered on record, *July 6*

1890

W. L. Leatham

WARRANT RETURNED TO

Applicant

STATE OF GEORGIA

1890

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears *A. J. McAlister* 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 continually since the *27th* day of *August* 1862; 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 *1st Sergeant* in Company *E*, of *1st* *Regiment* of *Georgia* Volunteers *Anderson's* Brigade; that whilst engaged in such military service, at the battle of *Centerville* in the State of *Georgia*, on the *27th* day of *August* 1862, he was

wounded as follows: *While in action during the battle of Centerville, my arm sustained a severe wound in the left eye while engaged in firing a cannon. I suffered a severe wound in the head and arm. I lost the right eye and the right arm. I lost the right eye and the right arm.*

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 *thirty* dollars.

Sworn to and subscribed before me, this the *6th* day of *January* 1891, *A. J. McAlister*

Note. State fully nature of wound or 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 *Fulton* county, 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 *2nd* 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.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears *A. J. McAlister* 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 continually since the *27th* day of *August* 1862; 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 *1st Sergeant* in Company *E*, of *1st* *Regiment* of *Georgia* Regular *Volunteers* *Anderson's* Brigade; that whilst engaged in such military service at the battle of *Centerville* in the State of *Georgia*, on the *27th* day of *August* 1862, he was

wounded as follows: *was injured while in active service at Fort Pulaski, by some substance being thrown in his left eye while engaged in firing a cannon. did not lose the sight of his eye at once, but inflammation set in and from this he lost the sight in his eye, and from sympathy the sight of his right eye is greatly impaired so much so that he can very indistinctly and only with the use of strong glasses.*

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 *thirty* dollars.

Sworn to and subscribed before me this the *2nd* day of *January* 1891, *A. J. McAlister*

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *2nd* day of *January* 1891

Executed in the presence of us:

[L. S.]

William A. Candler
W. L. Candler

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P.O.

service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

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

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
2nd day of January 1891

[L. S.]

Executed in the presence of us:

W. B. Candler
M. B. Candler
DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

Audited

Feb. 9th 1889
Wm. J. Campbell
COMPTROLLER-GENERAL

Fulton
Maimed Soldiers.

Voucher No. 286

Amount. \$ 30.

Paid to *J. M. Wilkerson*
For Loss of left Eye

July 9 1889

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK.

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

applicant

Audited

18

COMPTROLLER-GENERAL

Maimed Soldiers.

Voucher No. 381

Amount \$ 30

Paid to *A. J. McAllister*
For Loss of One
Eye

July 6 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK.

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

applicant

No. 286.
STATE OF GEORGIA, } Atlanta, Ga. Feb'y 9 1889.
EXECUTIVE DEPARTMENT.

Mr. J. M. Wester 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

Loss of Left Eye, Thirty & 00/100 Dollars.

He is entitled to receive the sum of

The Treasurer will pay the same and hold his receipt on the 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,
Thirty & 00/100

Dollars,
per above voucher, this 9 of Feb'y 1889.

A. J. McAlister

No. 381
STATE OF GEORGIA, } Atlanta, Ga. Feb'y 6 1890.
EXECUTIVE DEPARTMENT.

Mr. A. J. McAlister 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

Loss of one Eye, Thirty & 00/100 Dollars.

He is entitled to receive the sum of

The Treasurer will pay the same and hold 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,

Thirty & 00/100 Dollars,
per above voucher, this 6 of Feb'y 1890.

A. J. McAlister

per above voucher, this

9 of *Feb*
A. J. McHester

1880.

Charitable
per above voucher, this
of *Feb*
A. J. McHester
Dollars.
18 90

Audited, 1891.

COMPTROLLER GENERAL.

McAlister, A. J.

1. Lumber

1891.

Maimed Soldiers.

Voucher No 105.

Amount \$ 30⁰⁰.

Paid to *A. J. McHester*

For *Loss of*

an Eye

Feb 5. 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

D. B. Noche

1891.

No.

105

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga. July 5. 1891.

Mr.

A. J. M. Alister

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. 16, 1889, and the same having been examined and allowed for

Sum of *Thirty*

He is entitled to receive the sum of

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.

H. J. Nathan

GOVERNOR.

By the Governor,

M. H. Harrison

Sec'y EXECUTIVE DEPARTMENT.

\$ 30⁰⁰

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

Thirty

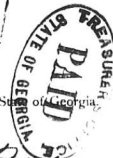
per above voucher, this

15

of

July

1891.



Dollars,

Approved by S. H. Harris

\$ 30⁰⁰

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



Thirty & 00/100

Dollars.

per above voucher, this 15 of July 1891.

Approved
by S. S. Harris

Approved (2)
929 (Mo)
McAllister Lawrence
Fulton
WIDOW'S APPLICATION

To Be Filled In By The Widow When
Husband Was on Active Service
of Georgia.

County Fulton
Name Laura E. McAllister
Widow of Lawrence E. McAllister
Company E
Regiment 3d Batt. Cav.
Date of Husband's Death Apr. 1914
Date of Marriage Nov. 15 1871
Approved John W. Clark
Pinkston Commissioner
By: Margaret W. Amos
Clk

JOHN W. CLARK,
Commissioner of Pensions.

5-22-29

ORDINARY'S CERTIFICATE

STATE OF GEORGIA

Fulton COUNTY.

I, Thos. H. Jefferson Ordinary of said County, do certify that I know Mrs. Lawrence E. McAllister, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know H. W. Caldwell the witness sworn to by Mrs. McAllister and that both 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.

Given under my hand and official seal of office this 17 day of May, 1929.
(SEAL OF ORDINARY)
Thos. H. Jefferson Ordinary.
Fulton County

Instructions:

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

Approved (2)
M. Callister Lawrence

WIDOW'S APPLICATION

To Be Filled In by the
Husband Was on Active
Service in the
Army
of Georgia.

County Fulton
Name Lawrence M. Callister
Widow of W. E. Callister

Company 16
Regiment 9th Art. Cal.

Date of Husband's Death Apr. 1914
Date of Marriage Nov. 15 1871

Approved John W. Clark
By Margaret W. Arnold
Attest OT

JOHN W. CLARK
Commissioner of Pensions.

5-22-29

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
Fulton COUNTY.

I, Thos H. Jeffries Ordinary of said County, do certify that I
knew Mrs. Lawrence M. Callister, the applicant for pension; that she is the person
she represents herself to be, and that she is continuously a bona fide resident of said County since
January 1st, 1920; that I also know H. M. Callister, the witness as to
H. M. Callister marriage, and that both the foregoing were duly sworn by me before signing the respective affi-
davits, 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 22 day of May, 1929
(SEAL OF ORDINARY) John W. Clark Ordinary,
Fulton County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You 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 of the county of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

(SEAL OF ORDINARY)

affixed the Seal of the Court of Ordinary, this the 9th, day of
May, 1929.

[Signature]
Ordinary and Ex-Officio J.C.O.

affidavit, is the lawful widow of W.E. McCallister who died in Fulton
County in said State of Ga on the 17 day of April, 1924,
and that she has not since remarried; ~~that she became the wife of~~ that she
~~the~~ day of to that she and he resided together as husband
and wife, continuously, since to the date of his death day of, and that he
was the same man who was on the pension roll of said State Ga from Fulton
County..... when he died.

Sworn to and subscribed before me, this the

21 day of May, 1929

Arthur R. Marshall } Ordinary
of Fulton } County.

(SEAL OF ORDINARY)

N. Small

McGowan, J. C.
Fulton County

No.

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County *Fulton*
Name *McGowan, J. C.*
Company *E-3rd Regt - Col.*
Regiment

Approved
J. W. Lindsey
J. W. LINDSEY,
Commissioner of Pensions

CHAR. P. BYRD, State Printer, Atlanta.

4/22/11 *6/22-1911*

ENTERED ROSTER OFFICE

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Fuller 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).
W. M. Lindsey, Atlanta - Fuller Co

2. How long and since when have you been a continuous resident citizen of this State?
Sixty One Years, in May 1910

3. Did you enter in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
Enlisted

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service).
Dec 1861, Co. B, 1st Regt. Cavalry

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge).
until Jan 1865

6. When and where was said Company and Regiment surrendered or discharged from the Service?
near Athens, Ga April 1865

7. Were you actually present with your Command when it was surrendered or discharged?
Yes

8. If you were not actually present, state specifically and clearly where you were.
Atlanta Ga

a. Where was your Command when you left it?
Atlanta Ga

b. When did you leave the Command?
March at Athens

c. For what cause did you leave?
X

d. By whose authority did you leave?
X

e. For how long was your leave granted? In what way?
X

f. Why did you not return to your Command after leave expired?
X

g. In what way were you prevented?
X

h. What effort did you make to return?
X

i. Were you captured during the war?
Yes

j. If so, when and where? In what prison were you held and when were you released?
Athens Ga April 1865

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value).
House & Lot in which I lived 1500.00 - #1400 E. Linden Ave Atlanta Ga.

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 sold as atom

12. What annual or monthly income or earnings of yourself and wife and the source derived have you?
own husband for month salary

13. Are you drawing a pension of any amount from this State or the United States?
No

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?
No

Sworn to and subscribed before me, this the

27 day of June 1910

John W. Lindsey Notary Public

of Fuller County.

1412

Confederate
Soldier's Application.

UNDER ACT 1910.

County Fuller
Name W. M. Lindsey
Company C-3 1st Regt. Cavalry
Regiment

Approved

J. W. LINDSEY,
Notary Public

CHAS. F. WYTHE STATE PRINTER, ATLANTA

ENTERED POSTER OFFICE

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 sold as above*

12. What annual or monthly income is derived of yourself and wife and the source derived have you? *one hundred to twelve dollars*

13. Are you drawing a pension of any amount from this State or the United States? *no*

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? *no*

Sworn to and subscribed before me, this the *21* day of *June* 1910

John W. Williams Notary Public
of *Wilkes* County.

1410

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

Approved John W. Tolson
1st May 26

~~CONFIDENTIAL~~
Commissioner of Pensions.

4-19-26-E-

_____ COUNTY.

Two H-Yaffies

I, 1 Leo H. Jaffee, Ordinary of said County, do certify that I know William H. Ryden as Qtdm the applicant for pension; that

she is the person she represents herself to be, and that she has been, continuously, a bona fide resi-

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 Margaret E. Phillips

the witness who swears to the service of husband; that both of them are now residents of said *Washington*

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 14 day of April 1926

(SEAL OF ORDINARY)

of San Francisco Ordinary.

of Frederick County

Instructions:

- [illegible]

WIDOW'S APPLICATION
Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920.

County Fulton
Name Victoria Ryder McArthur
Widow of Walter T. McArthur
Date of Marriage Mar 31 1864
Company 1st Military Dist.
Regiment Major D. F. McRae
Approved John W. Toland
1 May 26

Committee of

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.

I, Thos H. Jaffries, Ordinary of said County, do certify that I know Victoria Ryder McArthur 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 Margaret E. Phelps 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 14 day of April 1926.
(SEAL OF ORDINARY) Thos H. Jaffries 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, 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.

Victoria Ryder

Personally appears before me, Mrs. Walter T. McArthur 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. Victoria Ryder McArthur, 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? March 31st, 1860, Bibb County, Ga. to Walter T. McArthur

- 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.) Mar. 31, 1864, Montgomery Co., Ga. in 18th Military Dist. under Major D. F. McRae

5. When and where did the commands of your husband surrender or discharge from the Service?
Near Macon, Ga. at close of war

6. Was your husband personally present with his command when it was surrendered or discharged? Yes

7. If he was not present, state specifically and clearly where he was? -----
8. When did he leave the Command? -----
- a. For what cause did he leave? -----
- b. By whose authority did he leave? -----
- c. For how long was his leave of absence granted? ----- In what way?

- e. What was his physical condition when he left his command? -----
- 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? In what prison was he held and when was he released? -----

- j. When and where did your first husband die? Dec. 16th, 1894, Montgomery Co.
- 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

14th day of April, 1926.

John R. Jaffries C. C. Ordinary
of Fulton County.
(SEAL OF ORDINARY)

Mrs. Victoria Ryder McArthur
Applicant.

3. Only widows who married prior to January 1st, 1920, are exempted.
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 C. O. Ordinary
(SEAL OF ORDINARY) County.

Applicant.

(W)

Marriage License

Walter T. McArthur

TO

Miss Victoria Ryder

RECORDED

Date _____ 1922

Book "F"

Folio 293

GEORGIA, FULTON COUNTY.

Personally appeared Margaret E. Phillips who swear that she is the sister of Walter T. McArthur who married Miss Victoria Ryder, now Mrs. Victoria Ryder McArthur, she further swears that the said Walter T. McArthur entered the service of the Confederacy on March 31st, 1864 in Montgomery Co. Georgia, and served until the close of the war. She further swears that she was present when her brother left for the war and was also present when he returned.

Margaret E. Phillips

Sworn to and subscribed before me,
this April 14th, 1922.

Arthur R. McArthur
C. O. ORDINARY.

GEORGIA--Bibb County.

I, C. M. WILEY, Ordinary and Clerk Court of Ordinary of Bibb County, Georgia, do hereby certify that the within printing, writing or typewriting is a true and correct copy of the marriage license as issued to Walter T. McArthur and Miss Victoria Ryder also a true and correct copy of the certificate of their marriage, as it all now appears of record in office of Ordinary, in Book of Marriage License "F" folio 293.

IN TESTIMONY WHEREOF, I have hereunto set my hand officially and affixed the seal of the Bibb County Court of Ordinary, this the 2nd day of April 1922.

C. M. Wiley
Ordinary and Clerk Court Ordinary Bibb County, Ga.

(SEAL)

marriage license as issued to
and Miss Victoria Ryder, also a true and correct copy of the
certificate of their marriage, as it all now appears of record in office of Ordinary, in Book of
Marriage Licenses 77 folio 222.

IN TESTIMONY WHEREOF, I have hereunto set my hand officially and affixed the
seal of the Bibb County Court of Ordinary, this the 2nd day of April, 1920.

(SEAL)

C. M. Haley
Ordinary and Clerk Court Ordinary Bibb County, Ga.

(W)

MARRIAGE LICENSE

STATE OF GEORGIA, BIBB COUNTY

To any Judge, Justice of the Peace or Minister of the Gospel:

YOU ARE HEREBY AUTHORIZED TO JOIN

Walter T. McArthur [AND] Miss Victoria Ryder

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 promptly
return this License to me, with your certificate hereon, of the fact and date of the marriage.

Given under my hand and seal, this 16th day of March, 1920.

J. A. McManus (L. S.)
ORDINARY

CERTIFICATE

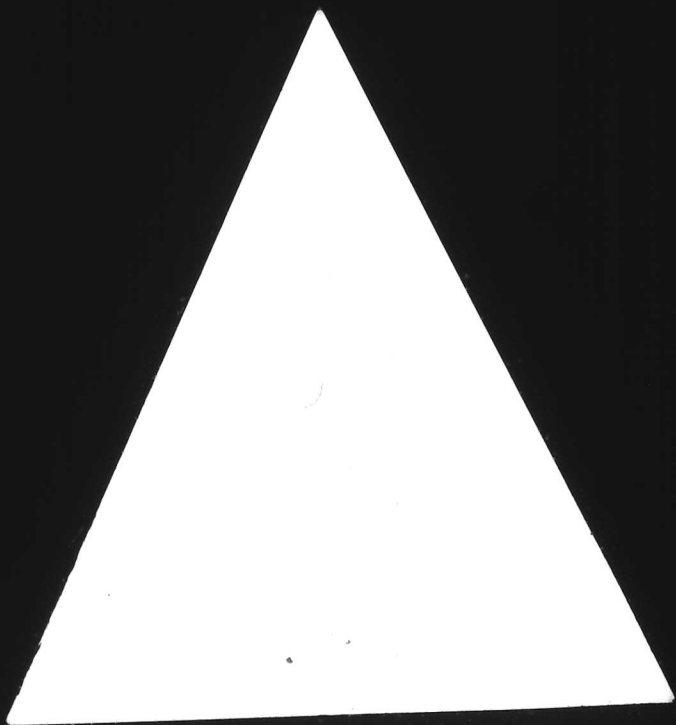
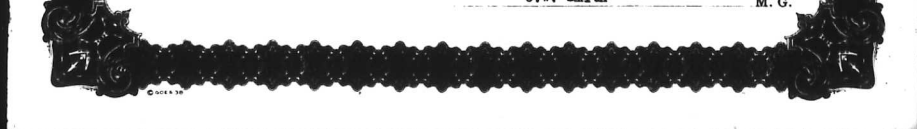
GEORGIA, BIBB COUNTY

I Certify, That Walter T. McArthur and Miss Victoria Ryder

were joined in Matrimony by me, this 31st day of March, 1920.

C. W. Smith

M. G.



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

_____ at _____

by _____

Witness my hand and seal this _____ day of _____, 1899.

Executed in presence of _____ (L.S.)

Deque 98

6007 Dec. 1894.

(For Those Already Enrolled.)

No. *2070* *1900*

INDIGENT
SOLDIER'S PENSION,
1899.

Name *James M. O'Beir*
County *Fulton*

WARRANT ISSUED

4/18 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

app. h.

Gen. W. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears James J. McRae 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 1st day of April 1880; that he is 57 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of Confederates) during the war between the States, and served for the term of 3 years in Company E, of 16th Regiment of Batt of Col.; that his physical condition is as follows:

Loss of both legs.
General debility
that his property consists of the following items

of the value of 1 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Fulton county been allowed a pension for the year 1897

Sworn to and subscribed before me, this, 11th day of January 1899. James J. McRae
W. H. H. H. H. Ordinary.

State of Georgia,

Fulton County.

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

Given under my official signature and seal, this 11th day of January 1899.



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

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

State of Georgia,

Fulton County.

I, W. H. H. H. H.

Ordinary of said County,

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

Given under my official signature and seal, this
day of January 1899.



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

Note.—The blank spaces should be filled.

Note.—An affidavit should not be allowed before January 1st, 1899.

774. 20. 20

No. 41918

Confederate

UNDER ACT 1910.

County Fulton

Name Andrew J Mc Bride

Company C.E.

Regiment 10 Ga. Inf.

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

ENTERED ROSTER OFFICE

OCT 29 1917

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Bullman 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) Andrew J. McBride Fulton Co. 182 Congress St. Atlanta Ga
2. How long and since when have you been a continuous resident citizen of this State? 81 Years
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Enlisted in April 1861
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) April 1861 Forsyth Co. 10 Georgia Infantry
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) until April 9th 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? Appomattox Creek Va
7. Were you actually present with your Command when it was surrendered or discharged? So
8. If you were not actually present, state specifically and clearly where you were. In Augusta Ga at Hospital
- a. Where was your Command when you left it? At Cold Harbor Va
- b. When did you leave the Command? June 1st 1864
- c. For what cause did you leave? Wounded at Cold Harbor
- d. By whose authority did you leave? Medical Authority
- e. For how long was your leave granted? In what way? until returned healed
- f. Why did you not return to your Command after leave expired? unable
- g. In what way were you prevented? Inability
- h. What effort did you make to return? Started to return and stopped in hospital
- i. Were you captured during the war? Captured in Fed in 1864 in Fayetteville Ga
- j. If so, when, and where? In what prison were you held and when were you released? held in Fed unable to travel
9. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1908? (Make list by items and value.) None
10. What property of any kind have you 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 its cash value? (Make itemized list.) None
12. What annual or monthly income or earnings of yourself 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? No

Sworn to and subscribed before me, this

17 day of October 1917

Patrick H. Sullivan Ordinary

of Fulton County.

Soldier's Application.

UNDER ACT 1910.

Confederate

No.

46745

County Fulton

Name Andrew J. McBride

Company Ch. G.

Regiment 10th Ga. Inf.

Approved

J. W. LINDSEY,
Commissioner of Pensions

CLARK P. SMITH, State Printer, ATLANTA.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Fulton County.

Joseph S. Alfred of said State and County is hereby presented as a witness in support of the application of William R. McRobert 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? Joseph S. Alfred
93 Pulliam St. Atlanta Ga
2. How long and since when have you known 68 Years the applicant?
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? 188 Cooper St. Atlanta Ga from seeing him at home during that time
4. When, where and in what Company and Regiment did In April 1861 enlist during war from 1861 to 1865? (Give date and place).
5. How did you obtain your information of this Service? Has member of same Co
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) from April 1861 until Surrender
7. When and where was his Command surrendered or discharged (give date and place). At Appomattox Va
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? In Hospital at Augusta G.
11. If not where was he and how came him there?
12. When did he leave his Command? When Wounded in June 1864 where was his Command when he left it? Cold Harbor Va for what cause did he leave? Wounded
By whose authority did he leave. Medical Authority and how long was he granted leave? Until Wound Healed How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically). Of my own knowledge
13. In what way was he prevented from returning to his Command? Wounded How do you know? Because I knew he was
14. What effort did he make to return to his Command and how do you know? Started but stopped in Hospital in Augusta Va.
15. Was applicant captured as a prisoner. Yes If so, when and where? Exeter N.H.
In what prison was he held? None and when released

Sworn to and subscribed before me, this the

18 day of October, 1912.

William R. McRobert Ordinary,

of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.

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

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items.)
2. When and to whom was it sold or given to?
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? or was it made to obtain a pension?

Sworn to and subscribed before me, this the

19 day of October, 1912.

Ordinary,

of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

William R. McRobert Ordinary of said County, certify that I know the applicant William R. McRobert for Pension is the person he represents himself to be and resides in said County. That I also know Joseph S. Alfred the witness swearing to the service and _____ who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the

Tax Returns of _____ shows that value for tax is in 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____ for 1911 \$ _____ for 1912 \$ _____ for 1913 \$ _____ for 1914 \$ _____ for 1915 \$ _____

Sworn under my hand and official seal of office this 18 day of Oct, 1912.

William R. McRobert 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 true answers make to each question asked you and the evidence you shall give shall be the whole truth, so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self affidavits of freeholders unnecessary.

STATE OF GEORGIA, Fulton County

I, Thos H. Jeffries, Ordinary of said county, do certify that I personally know Mary T. McBride, the applicant, and that she is the lawful widow of A. J. McBride, and was on the Pension Roll of said Fulton county, and was paid a Pension from Fulton county for 1911, and at the time of his death on the 4 day of March 1912, there was due to him and unpaid his Pension of \$150.00 Dollars from the State of Georgia, and I know Russell L. Johnson, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 28 day of April 1912,
Thos H. Jeffries Ordinary,
Fulton County.

Mrs McBride, A. J.

Fulton County

No.

1918

Application for Pension Due
 Deceased Soldier

UNDER ACT 1891
 To be paid his Widow or Dependent Children

at
Mrs Mary T. McBride
 Widow of A. J. McBride
 of Fulton County

Co. Regt. Vol.

Approved and paid

1918.

J. W. LINDSEY,
 Commissioner of Pensions.
 INTERESTED PARTIES TO BE PAID PRIOR
 ATLANTA, GA.

Paid

GEORGIA, _____ County.

I hereby authorize and constitute _____ of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 191 _____, through my deceased husband, _____ who was on _____

Pension Roll and paid from _____ for 19 _____

Witness my hand this _____ day of _____ 19 _____

Attested before me:

Application for Pension Due Deceased Soldier

To Be Paid to His Widow or Dependent Children

UNDER ACT APPROVED OCTOBER 9, 1901

STATE OF GEORGIA, Fulton County

Personally before me comes Mrs. Mary F. McBride, of said county, after being duly sworn, on oath says that she is the widow of A. J. McBride who was duly enrolled as a Service Pensioner from the county of Fulton and was paid a Pension of \$125.00 Dollars from Fulton county for 19 22, and that the said A J McBride died in Fulton county on the 4 day of March 1922, and at the time of his death a Pension of \$150.00 was due him from Fulton county and unpaid for 1922. Applicant further swears that she married the said A J McBride on the 7 day of November 18 64, in Jefferson 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 the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 13 day of April, 1922.

William R. Mabry, Ordinary.
Fulton County

Mrs Mary F McBride
(L. S.)
188 Cooper

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Fulton County

Personally before me comes Russell C. Johnson, who, on oath says that he knew A. J. McBride while in life and that he knows Mrs. Mary F. McBride the above applicant; that he knows that the said A. J. McBride and Mary F. McBride were in due form of law married in the county of Jefferson in the State of Georgia on the 7 day of November 18 64, and that they resided together as husband and wife from date of marriage to the day of his death on the 4 day of March 1922, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 13 day of April 1922.

William R. Mabry, Ordinary.
Fulton County.

Russell C. Johnson

Note 1st—This form can be used by guardian or minor children where there is no widow
2d—Ordinary must send in all cases certified copy of marriage attached.

an oath says that he knew A. J. McBride while in life
and that he knows Mrs. Mary F. McBride
the above applicant; that he knows that the said A. J. McBride
and Mary F. McBride were in due form of law married in the county
of Jefferson in the State of Georgia on
the 7 day of November, 18 64 and that they resided together
as husband and wife from date of marriage to the day of his death on the 4 day
of March 1922, xxx, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 13 day of April 1922 xxx

Adams R. Abbott
Fulton } Ordinary.
County.

Russell L. Johnson

Note 1st.—This form can be used by guardian or minor children, where there is no widow.
2d.—Ordinary must send in all cases certified copy of marriage attached.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Fulton COUNTY

I, Thos H Jeffries Ordinary of said County, do certify that I know Mary F M Bude 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 13 day of April 1928

That I also know Hubert Johnson witness as to marriage, and I also know

that both 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.

Sworn under my hand and official seal of office this 18 day of April 1928
(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 give is true to the best of your knowledge and belief." 2. All affidavits must be made before the Ordinary in the presence of witnesses. 3. Additional affidavits may be taken if the Ordinary is not satisfied with the evidence. 4. Affidavits must be made before the Ordinary in the presence of witnesses. 5. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person, or by general reputation. 6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

NE BRIDE Mary F M Bude
28 Oct 1928
Fulton County
800 CL

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—As Amended by Act of 1919.

County Fulton
Name Mary F M Bude
Widow of Agnes Bude
Company E
Regiment 10 Ga
Approved: John W. Teland
Commissioner of Pensions

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10/28 22

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY }

I, Thos H Jeffries Ordinary of said County, do certify that I

know Mrs. Mary F. Mc Bride 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 13 day of April 1922

That I also know Ruford B Johnson witness as to marriage, and I also know

that both of the foregoing were duly sworn by affidavit

before signing the respective affidavits, and that they are truthful and trustworthy and their statements

are entitled to full faith and credit.

Sworn under my hand and official seal of office this 18 day of April 1922

(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. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

ME BRIDE Mary F.
Fulton County
10/22

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—
As Amended by Act of 1913.

County Fulton
Name Mary F. Mc Bride
Widow of Ruford B. Johnson
Company E
Regiment 10 Ga
Approved: John R. Leonard
Commissioner of Pensions

J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co., State Printers, Athens.

10/22

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Fulton COUNTY }

Personally before me comes Mrs. Mary F. McBride of said County, who, after being duly sworn, says that she is the widow of A. J. McBride to whom, in the County of Jefferson State of Georgia she was married on the 7 day of Nov 1864, and that she remained his wife, and resided with him to the date of his death in March 1922 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in said State of Georgia, and he was on the Service Pension Roll of the State and paid a pension of \$125.00 in Fulton County for 1922 per annum, on account of being a soldier in Company E. 10th Ga. Regiment. (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of Fulton and she has continuously resided over fifty years day of 19.

Sworn to and subscribed before me, this the

13 day of April 19 22
William R. Myer Ordinary
of Fulton County.
(SEAL)

Mrs. Mary F. McBride
188 Cooper St.

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

STATE OF GEORGIA,

Fulton COUNTY }

Personally before me comes Russell C. Johnson known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Mary F. McBride who made the foregoing affidavit, is the lawful widow of A. J. McBride who died in Fulton County in said State of Georgia on 4 day of March 1922 and that she has not since remarried. That she became the wife of A. J. McBride on the 7 day of November 1864, and that she and he had resided together as man and wife continuously since 7 day of May 1864, and that the A. J. McBride was the same man who was on the pension roll of said State from Fulton County when he died.

Sworn to and subscribed before me, this the

13 day of April 19 22
William R. Myer Ordinary
of Fulton County.
(SEAL)

Russell C. Johnson

of said man personal earnings and who made the foregoing
affidavit, is the lawful widow of A. J. McBride who died in Fulton
County in said State of Georgia on 4 day of March 1922
and that she has not since remarried. That she became the wife of A. J. McBride on
the 7 day of November 1864 .., and that she and he had resided together as man and
wife continuously since 7 day of Nov 1864 .., and that the A. J. McBride was
the same man who was on the pension roll of said State from Fulton
County when he died.

Sworn to and subscribed before me, this the
..... 13 day of April 1922
Arthur R. Lynd Ordinary
of Fulton County.
(SEAL)

Russell Johnson

McCann, B. J.
Fullton Co. 1917

No.

74

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County *Fullton*
Name *B. J. McCann*
Company *F. 1st*
Samuel R. Jones
Regiment
Approved

J. W. Lindsey

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

4/25-1918

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).
2. How long and since when have you been a continuous resident citizen of this State?
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service).
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge).
6. When and where was your Company and Regiment surrendered or discharged from the Service?
7. Were you actually present with your Command when it was surrendered or discharged?
8. If you were not actually present, state specifically and clearly where you were.
- 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?
- j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1908? (Make list by items and value, and where situated).
10. What property of any kind have you disposed of and for what purpose since 4 Nov. 1908. To whom and for what price?
11. What property of any description of any kind, and of any value now owned and in the use possession and control of yourself and its cash value? (Make itemized list).
12. What annual or monthly income or earnings of yourself and the source derived have you?
13. Are you drawing a pension of any amount from this State or the United States?
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?

Sworn to and subscribed before me, this the

day of 191

Ordinary

County.

McLain, B. J.
 Soldier Co.
 1917
 Confederate
 Soldier's Application.

UNDER ACT 1910.

County

Name

Company

Regiment

Approved

J. W. LINDSEY,
 Commissioner of Pensions.

THAS F. STEEL, State Printer, ALBANY.

4/8/1917

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

County.

of said State and County is hereby presented as a witness in support of the application of B. J. McLean 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? T. L. Dobson
2. How long and since when have you known B. J. McLean the applicant? Since 1865
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? Orange Park, Georgia, since 1865
4. When, where and in what Company and Regiment did B. J. McLean enlist during war from 1861 to 1865? (Give date and place) Enlisted at Augusta, May 1864, at Andersonville Ga.
5. How did you obtain your information of this Service? He was in the same Company and Regiment together
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Enlisted from May, 1864 to May, 1865
7. When and where was his Command surrendered or discharged (give date and place) May 1865 at Albany Ga.
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there? Was present at the surrender
10. Was the applicant personally present with his Command at surrender? Yes
11. If not where was he and how came him there? Was present at the surrender
12. When did he leave his Command? Did not leave until surrender Where was his Command when he left it? Albany, Ga. for what cause did he leave? Surrendered
By whose authority did he leave? Capt. Geo. Austin and how long was he granted leave? None How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was with applicant twelve months during service and with him at surrender at Albany Ga.
13. In what way was he prevented from returning to his Command? None How do you know? He was present at the surrender
14. What effort did he make to return to his Command and how do you know? He did not
15. Was applicant captured as a prisoner? No If so, when and where? No
In what prison was he held? Not captured and when released

Sworn to and subscribed before me, this the 10 day of April, 1916

T. L. Dobson Ordinary,
of Albany County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

County.

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

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items.)
2. When and to whom was it sold or given to?
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?

or was it made to obtain a pension?
Sworn to and subscribed before me, this the day of 1916
..... Ordinary,
of County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

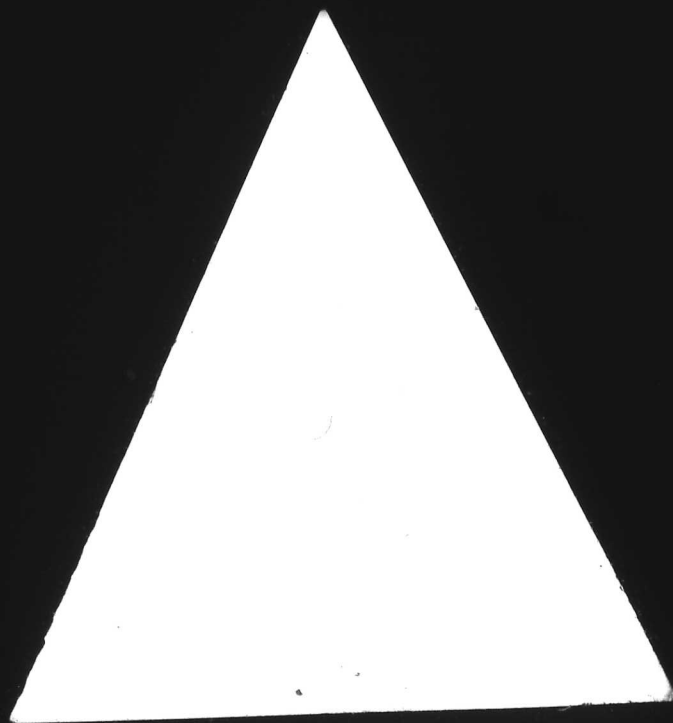
County.

I, H. G. M. Simmons Ordinary of said County, certify that I know the applicant for Pension is the person he represents himself to be and resides in said County. That I also know H. L. Dobson the witness swearing to the service and who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of shows that value for tax is in 1908 \$ for 1909 \$ for 1910 \$ for 1911 \$ for 1912 \$ for 1913 \$ for 1914 \$ for 1915 \$

Sworn under my hand and official seal of office this 10 day of Apr, 1916
H. G. M. Simmons Ordinary,
of Rich County.

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

(Question 4)
I enlisted in State Organized
Militia in May 1864 at Andersonville
Co. Company F. First Georgia Infantry.
Service - Guarding prisoners at Camp
Sumpter til surrender.



POWER OF ATTORNEY.

STATE OF GEORGIA,)
Macon County.)Know all Men by these Presents, That I, Margaret E. McCainof FultonCounty, in said State, do hereby appoint H. M. Reid

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

5 day of September 1899 [L. S.]
M. E. McCain

Executed in the presence of us:

J. B. Stewart
W. L. K. Arthur
Witness

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

Mrs. E. Margaret E. McCain
Fulton County (Mo.)
1891.

No. 3698

Widows' Pension

— PAID TO —

Mrs. Margaret E. McCain
— of —
Fulton County, Mo.

\$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,

Margarett E. McCain

or *Fulton*

County, in said State, do hereby appoint *A. M. Reid* 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 *5* day of *September*, 189*7*.

M. E. McCain

[L. S.]

Executed in the presence of us:

J. B. Stewart
L. L. Cochran

Witnesses.

If allowed, send amount by

me at

and oblige



Warrant Issued

AND HANDED TO

1891

Warrant Issued

2000.00.

John

Count

Mrs. Margaret E. McCain

Widow's Pension

PAID TO

20. 2698

1891.

Mrs. Margaret E. McCain

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,

County of *Dulton*

In person came before me, the undersigned Ordinary in and for the County of *Dulton*

Mrs. *Margarett E. McCain*, who being sworn according to law, says under oath that she is the widow of *John A. McCain*, who was a soldier in the service of the Confederate States, and served as a member of Company *B*, of the

39th Regiment of *Mississippi* Volunteers; that he enlisted in said

service on or about the *22nd* day of *April*, 1862, and was in the

Confederate Army up to *December 5th*, 1862. That while in the

Army, ~~he was on the~~ a short time ~~before the~~ *Dec. 5th*, 1862, he was taken sick, she supposes from exposure and heavy marching, and carried to the *Mississippi* hospital at the town of *Brandon*, *Randolph County, Mississippi*. She received notice of his condition and went to him and nursed him the best she could but *Dec. 5th*, 1862. She

states that the disease was *cholera* and while he was in the army because when left home and entered the

service he was well. That *Cholera* being common at that time, and that she carried him back to *Scott County, Mississippi* and buried him in the *McCain* family

graveyard in *Dec. 1862*. Immediately after *Dec. 1862*, she returned to *Georgia* where she has resided ever since.

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 *11th* day of *November*, 1858, and that she has resided in *Georgia* continuously since the

first day of *January*, 1863; that *Georgia* is her home, and was such on the 23d day of *December*, 1890, and since said date she has not lived in any other State or locality.

Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of *Georgia*, approved *December 23d*, 1890, for the pension year ending *February 15th*, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the *11th* day of *September*, 1891.

L. L. Cochran Ordinary.

Notary Public.

M. E. McCain

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 shown 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 *Fullton*
L. B. Barnes and R. W. Walker

In person came before me, the undersigned Ordinary
 in and for said County, witnesses *R. L. Evans*

(each known to said Attesting Officer as truthful,
 reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
 Mrs. *Margaret E. McBain* of the County of *Fullton*
 State of Georgia, is the widow of *John A. McBain* who was a soldier in
 Company *C* of the *39th* Regiment of *Mississippi* Volunteers.
 That said soldier enlisted in the service of the Confederate States (*in the Georgia State Troops*) on or
 about the *22nd* day of *April* 186*2* That while in said service, or by
 reason of said service in the Army, he lost his life as follows:—

*by sickness & disease as they
 are informed - They do not per-
 sonally know of his death -
 They have always heard since
 the war that he died as
 stated in Mrs. McBain's affi-
 davit*

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

We further swear that Mrs. *Margaret E. McBain* was the wife of said
 soldier during the service, and that she has not intermarried since his death, and that she resides in
Fullton County of the State of Georgia.

Sworn to and subscribed before me, this, the
5th day of *September* 1891.

W. L. L. L. L.
 Ordinary.

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

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

Form No. 3.

State of Georgia,

County of *Fullton*

I, *W. L. L. L.* Ordinary

in and for said County of *Fullton*
 State of Georgia, hereby certify that I am acquainted with Mrs. *Margaret E. McBain*
 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
5th day of *September* 1891.

SEAL

W. L. L. L.
 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 contract 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, W. L. Calhoun Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Margaret W. McCain 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 John A. McCain 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 1st day of February, 1894.

[Seal]

W. L. Calhoun

Ordinary.

Form No. 2.

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 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.

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by _____ to
 me at _____, and oblige

WIDOWS' PENSION,

for year ending February 15th, 1894.

PAID TO—

Margaret McCain

—OF—

Fulton

COUNTY.

WARRANT ISSUED

AND HANDED TO

1894,

OFFICE

OF THE CLERK OF THE SUPERIOR COURT, FULTON COUNTY, GEORGIA.

1894.

No. 1578

FOR THOSE HERETOFORE PAID.

Margaret McCain
Fulton County

For Widows' Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,

Personally comes Mrs.

County of

Fulton

Margaret McCain,

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

her birth

1839

That she is the Widow of

John A. McCain

who was a Soldier in Company

C

of the

29th

Regiment of

Mississippi

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

1862

and served in the Army up to

December 5th

1863

That he lost his

life on the

12th

day of

December

1863

(State here

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

That while in the Army a short time before the said 5th of Dec, 1863 he was taken sick, she supposes from exposure and heavy marching, and carried to the Military Confederate Hospital at the town of Brandon, Rankin Co, Miss. where he died from the sickness and disease contracted while he was in the army, on the 7th day of December 1863.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 ; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

1st

day of February 1894.

M. L. Beckwith Ordinary.

Post-office

Margaret E. McCain

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. Margaret E. McCain 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 John A. McCain deceased, and as such has heretofore been allowed a pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the day of January 1891.

[Seal]

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Fulton County.

Know ALL MEN BY THESE PRESENTS, That I, Margaret E. McCain

County, in said State, do hereby appoint H. M. Reid of Atlanta Ga. my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia 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 February 1893.

Executed in the presence of us:

[Signatures]

DIRECTIONS.

Send amount by me at and oblige

Widow's Pension, for year ending February 15th, 1893. PAID TO — Margaret E. McCain. Warrant Issued. AND HANDLED TO H. M. Reid. 1893. No. 1474. 1893. For those heretofore paid. 1893.

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. Margaret E. McCain 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 John A. McCain 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 day of Feb 1895.

[Seal]

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Fulton County.

County.

Know ALL MEN BY THESE PRESENTS, That I,

County in said State, do hereby appoint Margaret E. McCain 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.

Executed in the presence of us:

[Signatures]

DIRECTIONS.

Send amount by me at and oblige

Widow's Pension, for year ending February 15th, 1895. PAID TO — Margaret E. McCain. Warrant Issued. AND HANDLED TO Margaret E. McCain. 1895. No. 601. 1895. For those heretofore paid. 1895.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of WILKINSON

Personally comes Mrs.

Margaret E. McCain

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

WILKINSON

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

continuously ever since *her birth* 1829 That she is the Widow of

John H. McCain who was a Soldier in Company

C of the *59th* Regiment of *Mississippi*

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

1862 and served in the Army up to *December 5th* 1862 That he lost his

life on the *7th* day of *December* 1862 (State here

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

That while in the Army a short time before he died he was taken sick, on a march from exposure & heavy marching, & carried to the Military Hospital at the town of Brandon, Rankin Co, Miss. where he died from the sickness & disease contracted while in service in the army, on the 7th day of Dec. in 1862

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

W. L. Leachman Ordinary.

Margaret E. McCain
Post-office *Helena*

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally Comes Mrs.

Margaret E. McCain

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 *her birth* 1829 That she is the Widow of

John H. McCain who was a Soldier in Company

C of the *39th* Regiment of *Mississippi*

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

1862 and served in the Army up to *December 5th* 1862 That he lost his

life on the *7th* day of *December* 1862 (State here

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

That while in the Army a short time before the said 5th of Dec, 1862 he was taken sick, she supposes from exposure and heavy marching, and carried to the Military Confederate Hospital at the town of Brandon, Rankin Co, Miss. where he died from the sickness and disease contracted while he was in the army, on the 7th day of December 1862

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

M. E. McCain
Post-office *Helena*

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.

Margaret E. McCain

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 John N. McCain 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 5th day of February 1896.



W. L. Calhoun

Ordinary.

Form No. 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 at

In Witness Whereof, I have hereunto set my hand and seal, this

day of 1896.

[L. S.]

Executed in the presence of

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

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

Margaret E. McCain

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 John N. McCain 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 2nd day of February 1897.



W. L. Calhoun

Ordinary.

Form No. 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 at

In Witness Whereof, I have hereunto set my hand and seal, this

day of 1897.

[L. S.]

Executed in the presence of

Widow of Margaret E. McCain
Fulton County

FOR THOSE HERETOFORE PAID.

1896.

No. 2327

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Margaret E. McCain

OF

Fulton County.

WARRANT ISSUED

AND HANDLED TO

april 1896.

W. L. Calhoun, Ordinary.

Widow of Margaret E. McCain
Fulton County

FOR THOSE HERETOFORE PAID.

1897.

No. 1097

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Margaret E. McCain

OF

Fulton County.

WARRANT ISSUED

AND HANDLED TO

april 1897.

W. L. Calhoun, Ordinary.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

Margaret E. McCain

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 her birth 18 00 That she is the Widow of John N. McCain who was a Soldier in Company of the 70th Regiment of Mississippi Volunteers, that he enlisted in said regiment on or about the month of April 186 2 and served in the Army up to December 5th 186 2 That he lost his life on the 7th day of December 18 62 (State here

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

That while in the Army a short time before the said 5th of December he was taken sick, she supposes from exposure and heavy marching, and carried to the Military Confederate Hospital at the town of Brandon, Rankin Co. Miss. where he died from the sickness and disease contracted while he was in the Army, on the 7th day of December 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 00 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 2nd day of Feb 1896.
M. E. McCain Ordinary.

Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

Margaret E. McCain

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 her birth 18 00 That she is the Widow of John N. McCain who was a Soldier in Company of the 39th Regiment of Mississippi Volunteers, that he enlisted in said regiment on or about the month of April 186 2 and served in the Army up to December 5th 186 2 That he lost his life on the 7th day of December 18 62 (State here

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

That while in the Army a short time before the said 5th of Dec, he was taken sick, she supposes from exposure and heavy marching, and carried to the Confederate Hospital at Brandon, Rankin Co. Miss. where he died on the 7th day of December 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 00 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 2nd day of Feb 1897.

M. E. McCain Ordinary.

Post-office

POWER OF ATTORNEY.

State of Georgia,

County.

I, hereby authorize

f. q

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

1898.

NO. 2148

WIDOW'S PENSION,

For year ending February 1st, 1898.

PAID TO

Mrs. Margaret McLean

of

Fulton County

Widow of G. N. McLean

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1898.

2/2

AND REMITTED TO

Chas. H. H. H.

Geo. W. Harrison, State Printer, Atlanta.

1899.

NO. 853

WIDOW'S PENSION,

For year ending February 1st, 1899.

PAID TO

Mrs. M. E. McLean

of

FULTON County

Widow of John M.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1899.

2/1

AND REMITTED TO

Chas. H. H. H.

Geo. W. Harrison, State Printer, Atlanta.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FultonPersonally Comes Mrs.
Margaret M. Cain

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 1862 That she is the Widow of
John N. Mc Cain who was a Soldier in Company
of the 39th Regiment of Miss.
Volunteers, that he enlisted in said regiment on or about the month of April
1862 and served in the Army up to Dec. 5th 1862 That he lost his
life on the 7th day of Dec. 1862 (State here
full particulars of the husband's death, when, where and from what cause.)

Died in hospital at Brandon
Rankin Co. Miss. from exposure.

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 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

day of Feb. 1898.

M. H. Hulsey Ordinary.

Post-Office

State of Georgia,

Fulton County.

I, W. H. Hulsey Ordinary of said County, certify that I am well acquainted
with Mrs. Margaret M. Cain 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. 1890

Given under my official signature and seal this the 2 day of July 1898.

Official
Seal.

Ordinary of Fulton County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FULTON

Personally Comes Mrs.

Margaret M. Cain

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 1862 That she is the Widow of
John N. Mc Cain who was a soldier in Company
of the 39th Regiment of Miss.
Volunteers, that he enlisted in said regiment on or about the month of April
1862 and served in the Army up to Dec. 5th 1862 That he lost his
life on the 7th day of Dec. 1862 (State here
full particulars of the husband's death, when, where and from what cause.)

Died in hospital at Brandon
Rankin Co. Miss. from exposure.

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 FULTON County for the year ending
February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this

day of July 1899.

M. H. Hulsey Ordinary.

Post-Office

State of Georgia,

FULTON County.

I, W. H. HULSEY,

Ordinary of said County, certify that I am well acquainted
with Mrs. Margaret M. Cain 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. 1890

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

Official
Seal.

Ordinary of 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

at _____

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

day of _____ 1900.

[L. S.]

Executed in presence of

McCain, Margaret C.,
Fulton County
To Those Hereofore Paid

1900.

NO. 959

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Mrs. Margaret C. McCain

or

Fulton

County,

Widow of

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 13

1900,

AND HANDED TO

W. H. Harrison

W. H. Harrison, New York, Alaska.

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

McCain, Margaret C.,
Fulton County
To Those Hereofore Paid.

1901.

No. 207

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. M. C. McCain

or

Fulton

County.

Widow of John W. McCain

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

May 17

1901,

AND HANDED TO

W. H. Harrison

W. H. Harrison, New York, Alaska, Ga.

FOR THE YEAR ENDING FEBRUARY 15, 1901

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

Mrs. Mc Cain

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 1862 That she is the Widow of Margaret Mc Cain who was a soldier in Company 39th of the Miss Regiment of April Volunteers, that he enlisted in said regiment on or about the month of April 1862 and served in the Army up to Dec 5th 1862 That he lost his life on the 7th day of Dec 1862 (State here particulars of the husband's death, when, where and from what cause)

Died in hospital at Boudon
Miss from exposure

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

I have been 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, 1900.

Sworn to and subscribed before me, this 3 day of Jan, 1900. Margaret E. McCain
Notary Public

State of Georgia,

County of Fulton

Ordinary of said County, certify that I am well acquainted

with Mrs. Margaret Mc Cain, 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, 1860

Given under my official signature and seal, this 13 day of Jan, 1900.

Official
Seal

Ordinary of Fulton County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

Mrs. McCain

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 1862 That she is the Widow of John R. McCain who was a soldier in Company 39th of the Miss Regiment of April Volunteers, that he enlisted in said regiment on or about the month of April 1862 and served in the Army up to Dec 5th 1862 That he lost his life on the 7th day of Dec 1862 (State here particulars of the husband's death, when, where and from what cause)

Died in hospital at Boudon
Miss from exposure

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

I have been 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, 1901.

Sworn to and subscribed before me, this 17th day of Jan, 1901. M. E. McCain
Notary Public

State of Georgia,

County of Fulton

Ordinary of said County, certify that I am well acquainted

with Mrs. Margaret McCain, 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, 1860

Given under my official signature and seal, this 17th day of Jan, 1901.

Official
Seal

Ordinary of Fulton County.

State of Florida. Before the under-
Volusia County, I signed personally
comes John T. Hull who being by
me duly sworn says on oath that
he is acquainted with Margaret
E. McCain of Atlanta Ga widow of
John N. McCain and applicant for
pension, as the widow of a con-
federate soldier, in the State of Georgia
that he knew her before her marriage
+ she was then Margaret E. Miles. That
he knew her parents Wm + Jane Miles.
That he and she were brought up in
the same community in the State of Geo-
gia that he knows and so states that she
is a native of Georgia - born in that State.
Sworn to + subscribed before
me this Feb 6 1893. John T. Hull
Murray E. Hale

Notary Public
State of Florida

Georgia. Fulton County.

J. W. L. Calhoun, Ordinary of said County, hereby
certify that John T. Hull, whose signature appears
to above affidavit is one well known, that he is
a reputable, truthful witness and his affidavit
is entitled to full faith and credit. Witness my
official signature and seal of office, this the
6th day of February 1893.

J. W. L. Calhoun
Ordinary

Georgia. Carroll County.

Personally before the undersigned
comes R. L. Rowe who being by me
duly sworn says on oath that he
is acquainted with Margaret E.
McCain widow of John N. McCain and
applicant for pension as confeder-
ate soldier's widow. That he knew her
before her marriage that she was then
Margaret E. Miles. That he and
she were brought up in the same
community in this State. That he
knew her parents Wm + Jane Miles and
that he knows and so states that said
Margaret E. McCain is a native of Georgia
born in said State.

Sworn to + subscribed before R. L. Rowe
me this Feb 7th 1893.
V R. W. H. M. P.

Georgia. Carroll County.

J. G. Brown, Ordinary of said County, hereby cer-
tify that I know Dr. R. L. Rowe whose genu-
ine signature appears to above affidavit.
That he is reputable and truthful and
his affidavit is entitled to full credit.
Witness my hand and official seal this
14th day of Feb 1893.

J. G. Brown
Ordinary Carroll
County, Ga.

State of Mississippi } Before me, the undersigned,
County of Scott } Judge of the Chancery
Court, the same being a Court of record and hav-
ing a seal, personally appeared ~~Edw.~~

~~Siles~~ - G. W. Neal and W. P. Roberson
whose genuine signatures are signed to this
affidavit and whom I certify to be repu-
table and truthful witnesses, entitled to full
credit as such and who, by me being duly
sworn according to law say on oath
that they were soldiers in the Confederate
army in the late war and members of
Company "C", 34th Regiment of Mississippi Vol-
unteers - that John H. McCain was a mem-
ber of said Company having enlisted
therein early in the year 1862 - that while under
his command in the actual military ser-
vice of the Confederate States he was taken
sick and carried to the Confederate Mil-
itary hospital at Brandon, Rankin
County, Miss. in the latter part of the year 1862
and it was regularly reported to the Com-
pany afterwards that he died there
early in Dec. 1862. He never returned to his
command and after their return home
they were told that his remains had been
brought home and buried in the Miles
family graveyard.

Deponents knew the said John H. McCain
and Margaret C. McCain at the beginning
of the late war and they were then liv-
ing together as husband and wife and

County, Ga.

Georgia, Carroll County,
J. S. J. Brown Ordinary in
and for said County, hereby
certify that V. R. Davis, who
witnessed the within affidavit of
Dr R. L. Rowe, is a qualified
and acting Justice of the Peace
in this County, and his official
acts are worthy of full credit,
and his signature thereto is
genuine.

Given under my hand and
Seal this, the 14th day of
Feb'y, 1843.

J. S. J. Brown
Ordinary, C. C.

of the late war and they were then living together as husband and wife and

were or living at the time the said John
St. entered the army as aforesaid.

Deponents have no interest in this claim
for pension nor its result nor are they
in any way related to Margaret D. McCain

H. D. Liles

G. H. Neal

W. S. Robertson

Sworn to and subscribed before me this the
16th day of May 1891 as witnesses
my official signature with the seal of
the Court annexed.

J. R. Graham Chancery Clerk
of the 6th Chancery Court District of
Mississippi

Georgia - Harris County

To any Ordained Minister of the Gos-
pel, Judge, Justice of the Inferior Court,
or Justice of the Peace.

You are hereby authorized to join

John H. McCain and

Margaret E. Miles

in the Holy State of Matrimony according
to the Constitution and laws of this State
and for which this shall be your Suf-
ficient license

Given under my hand and seal
this 6th day of Nov. 1890

W. S. Johnson

W. S. Johnson, C. C. O.

Georgia - Harris County

I do hereby certify that

John H. McCain and

Margaret E. Miles

were duly joined in Matrimony by me
this 7th day of Nov. 1890

William Nelson, J. P.

Georgia - Harris County

I J. F. C. Williams, Ordinary in and
for said County hereby certify that the
above and foregoing is a correct copy
of Marriage license and Certificate of file
in this office.

Witness my hand & seal this 21st 1891

J. F. C. Williams

Ordinary

State of Mississippi: Before me, the undersigned
County of Scott. I an acting Justice of the
Peace in and for said County & State, per-
sonally came, J. M. Stewart, Mary Ann
Stewart and Sarahtha M. Williams
who being duly sworn say on oath that
they were well acquainted with John Mc
Cain and his wife Margaret E. McCain
- that at the beginning of the late war
between the States they were residing in
the County aforesaid as husband and
wife - that in the year A.D. 1862 the said
John McCain enlisted as a volunteer
in Company "C" 39th Regiment of Miss-
issippi Volunteers and entered the
military service of the Confederate
States - that at the time of his enlist-
ment he was in good health and
apparently perfectly sound in body
but after his entrance into the army
and while with his command, away
from home, he sickened and died.
- His remains were brought back to
the County aforesaid and buried in the
Miles family graveyard, in the month
of Decr in the year 1862
Deponents have always been informed
and they state this fact on information,
that he died in a military hospital in
the town of Brandon, Rankin County
said State. ^{Deponents that they are knowingly related to Mary}
^{Ann Stewart & Sarahtha M. Williams & that they are well acquainted with John McCain}
All other facts herein they state too.

All other facts herein they state positively and of their own knowledge -

J. H. Stewart
J. H. Stewart &
J. H. Stewart
Sworn to and subscribed before me this the
20th day of March 1891. G. W. Holmes, No. 3, S.

This is to certify that the undersigned was member of Co. C 38 Regiment 4th Corps in Confederate Army and know that the above affidavit is correct

J. C. Anderson,
9th Feb

CERTIFICATE OF CLERK TO JUSTICE OF THE PEACE.

The State of Mississippi,
Seale COUNTY.

CHANCERY COURT.

I, N. D. Liles, Clerk of the Chancery Court of said County, do hereby certify that G. W. Holmes, affiant whose genuine signature appears to the annexed and foregoing Certificate of Acknowledgment, is now, and was at the date of said Certificate, an acting Justice of the Peace in and for said County, duly elected and qualified, according to law, that full faith and credit are due to all his official acts as such, and that his said Certificate is in due form of law.

In Witness Whereof, I have hereto set my hand and affixed the seal of said Court, at my office, in Forest this 28 day of March 1891

N. D. Liles Clerk.

said County, do hereby certify that Y. W. Nolin, S.
whose genuine signature appears to the annexed and foregoing affidavit
~~Certificate of Acknowledgment~~, is now, and was at the date of said Certificate, an acting Justice of the Peace
in and for said County, duly elected and qualified, according to law, that full faith and
credit are due to all his official acts as such, and that his said Certificate is in due form
of law.

In Witness Whereof, I have hereto set my hand and affixed the seal of said Court,
at my office, in Forest this

28 day of March 18 91

N. D. Liles Clerk.

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 W. H. Cain and J. L. Cain

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 25th day of Aug 1899

I hereby certify that W. H. Cain and J. L. Cain

were joined together in the HOLY BANS OF MATRIMONY

on the 25th day of Aug 1899, by me, W. H. Cain

State of Georgia,
Fulton County.

S. S.

ATLANTA, GA., Aug 26 1999

ORDINARY'S OFFICE

I, W. H. Cain, 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

and J. L. Cain 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.

W. H. Cain
Clerk Court of Ordinary.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY.

I, W. H. Cain, Ordinary of said County, do certify that I

know Mrs. J. L. Cain 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 26 day of Aug 1899

That I also know W. H. Cain witness to marriage, and I also know

that both of the foregoing were duly sworn by me W. H. Cain before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 26th day of Oct 1999

(SEAL.) W. H. Cain 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 of the county of residence.
4. Only widows who married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person, or by general reputation.
6. Widows of Disabled Pensioners must use this Application Blank and state and prove full term of husband's service--because he made no proof of service and was not required to do so.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Roll of any other County.

As Amended by Act of 1919.

County Fulton
Name W. H. Cain
Widow of W. H. Cain 1899
Company 5th
Regiment 1st
Approved

J. W. LINDSEY,
Commissioner of Pensions,
Bryd Printing Co., State Printers, Atlanta.

10-23-199

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Duval COUNTY }

Personally before me comes Mrs. J. V. McLain of said County, who, after being duly sworn, says that she is the widow of Capt. McLain to whom, in the County of Duval State of Georgia she was married on the 12 day of Aug. 1875, and that she remained his wife, and resided with him to the date of his death in July 20 1911 and that she has not since his death remarried. At the time of his death he was a resident of Duval County, in said State of Georgia, and he was on the Duval Pension Roll of the State and paid a pension of \$ 60.00 in Duval County for 1911 per annum, on account of being a soldier in Company F Regiment 1 Ga (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of Duval and she has so continuously resided since 1st day of Janu. 1900

Sworn to and subscribed before me, this the

26 day of Aug. 1911

John C. Mason Ordinary

of Duval County

(SEAL)

Mrs. J. V. McLain
Duval

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

STATE OF GEORGIA,

Duval COUNTY }

Personally before me comes W. H. Dorsey known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. J. V. McLain who made the foregoing affidavit, is the lawful widow of P. J. McLain who died in Duval County in said State of Ga on 20 day of Sept. 1911 and that she has not since remarried. ~~That she became the wife of~~ on the 12 day of Aug. 1875, and that she and he had resided together as man and wife continuously since 1st day of Janu. 1879, and that the P. J. McLain was the same man who was on the pension roll of said State from Duval County Ga when he died.

Sworn to and subscribed before me, this the

26 day of August 1911

John C. Mason Ordinary

of Duval County

(SEAL)

W. H. Dorsey
Duval

of their own personal knowledge and belief, who made the foregoing affidavit, is the lawful widow of B. J. McLean who died in Tanilton County in said State of Ga on 20 day of Feb 1918 and that she has not since remarried. ~~That she became the wife of~~ on the ~~day of~~ 18, and that she and he had resided together as man and wife continuously since 1st day of June 1879, and that the B. J. McLean was the same man who was on the pension roll of said State from Jan 1879 County Ga when he died.

Sworn to and subscribed before me, this the 20 day of August 1918
Charles C. Mason Ordinary
of Tanilton County.
(SEAL)

W. H. S. Dorsey
J

McCalla, Charles R.
Fulton County

No. _____ *872*

INDIGENT PENSION
1903.

Name *Chas R McCalla*
County *Fulton*
Co. *B-35* Reg. *1st*
Approved _____ 190*3*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

7/9/03

POWER OF ATTORNEY.
STATE OF GEORGIA,
COUNTY, }

I, _____, hereby authorize

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

Witness my hand and seal, this _____ day of _____, 190*3*.

Executed in the presence of _____ [L. S.]

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 _____, 1903.

Executed in the presence of

[1. 8.]

INDIGENT PENSION.

1903.

Name: Charles R. McCalla

County: Tulston

Ca. B. - 35 yrs

Approved: _____ 1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

W. H. Harrison, New Prison, Atlanta.

7/19/03

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Tulston County.

Charles R. McCalla

of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby subjoins his affidavit and answers as follows:

1. What is your name and where do you reside? Give State, County and post office.
Charles R. McCalla to 88 Cooper St. Atlanta Georgia, 38 years
2. How long and since when have you been a resident of this State?
5th of April 1845
3. When and where were you born?
Newton County (now Rockdale) 1845
4. When and where and in what company and regiment did you enlist or serve?
Enlisted August 10th 1861, Co. B. 35th Ga. Regt.
5. How long did you remain in such company and regiment?
About 3 years + 9 months
6. When and where was your company and regiment surrendered and discharged?
at Appomattox Court House Va April 9th 1865
7. Were you present with your company and regiment when it was surrendered?
No.
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?
Wounded at Petersburg April 2nd 1865 and was in Hospital
9. How much can you earn (gross) per annum by your own exertions or labor?
Nothing
10. What has been your occupation since 1865?
Teaching Farming & anything
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 & 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?
came back 1868 and became affected by being stiff hand swollen
13. What property, real and personal, or income, do you possess, and its gross value?
None
14. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868, 1869, 1900, 1901 and 1902, 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?
Tulston & Rockdale No Property Returned
16. How were you supported during the years 1869, 1900, 1901 and 1902?
Teaching & with keeping families
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?
1869, 10⁰⁰ per mo 1900⁰⁰ nothing
18. What was your employment during 1868, 1869, 1901 and 1902? What pay did you receive in each year?
1868-69 Teaching - 1400⁰⁰ nothing 1898-99, 10⁰⁰ per mo
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed?
Yes, wife 20 yrs + one son at home Boarding House No Son only employed ages wife 56 Alpha 23 + 21 son 19
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 claim?
None

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

Charles R. McCalla
Applicant.

of Tulston County.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, *Not testified before the Ordinary*
From Fulton County of Fulton.

Capt. N. C. Carr of said State and County, having been presented as a witness in support of the application of *Charles R. McCalla* 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? *Nathan C. Carr*
2. Are you acquainted with *Charles R. McCalla*, the applicant; if so, how long have you known him? *About 48 years*
3. Where does he reside, and how long and since when has he been a resident of this State? *Atlanta, lived in the State since birth*
4. When, where and in what company and regiment did he enlist, and how do you know? *August 10th 1861. Newton Co. Co. B. 35th Reg I was sent to*
5. Were you a member of the same company and regiment? *I was*
6. How long did he perform regular military duty? *About 3 years & 7 months*
7. When and where was his command surrendered? *April 9th 1865 at Appomattox Court House Va*
8. Were you present when it surrendered? *Yes*
9. Was applicant present? *No*
10. If he was not present, where was he? *(Wounded) Hospital*
 When did he leave his command? *April 2nd 1865* For what cause? *Gun shot wound*
 By what authority he left? *Field Surgeon* How do you know all of this?
I was present and Capt of his Company

11. What property, effects or income has the applicant? (Give your means of knowledge.) *None*
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? *Am intimate with his situation. Had 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? *Caravassing, Rheumatism & Arms lock*
15. Is the applicant unable to support himself by labor of any sort, if so, why? *Yes on account of Physical Condition*
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? *Preaching & Caravassing*
17. What portion of his support for these four years was derived from his own labor or income? *About one third*
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? *Has Rheumatism in Back, legs, & arms*

19. Who composes family? What property have they? Children's age and their earning capacity? *His self wife 2 children & one son two again at home housekeeping son employed at Rail Road Office*
20. What interest have you in the recovery of a pension by this applicant? *None*

Sworn to and subscribed before me, this the *29th* day of *June*, 1903. *N. C. Carr Capt. Co. B. 35th*
John R. Wilkinson Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, *Fulton* COUNTY.

Personally came before me *W. C. Martin M.D.* and *John R. Wilkinson 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 R. McCalla* applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Black Gunshot wound in the arm also flesh gunshot wound left shoulder Rheumatism & kidney effects legs swollen slightly & stiffen in right leg at knee it seems to me he is not physically capacitated to support himself by his own
and that we have no interest in said pension being allowed. J. N. Vining M.D.

Sworn to and subscribed before me, this the *29th* day of *June*, 1903. *John R. Wilkinson* Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, *Fulton* COUNTY.

I, *John R. Wilkinson* Ordinary, in and for said County, hereby certify that the applicant *Charles R. McCalla* resides in said County, and has been a bona fide resident of this State since the *5th* day of *April*, 1865, and that the witnesses, viz.: *Capt. N. C. Carr*

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 *Fulton* County show that applicant returned for taxation in his name in 1899 _____ Dollars of property, and in 1900 _____ Dollars of property, in 1901 _____ Dollars of property, in 1902 _____ Dollars of property.

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

Witness my hand and seal of office, this *29th* day of *July*, 1903. *John R. Wilkinson* 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.

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? Seaching
17. What portion of his support for those four years was derived from his own labor or income? Campaning
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Has Rheumatism in Back, legs, & arms
19. Who compose family? What property have they? Children's age and their earning capacity?

Sworn to and subscribed before me, this the 29th day of June, 1903.

H. C. Carr Capt. Co. B. 35th
Witness.

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 9th day of July, 1903.
John R. Wilkinson Ordinary,
of Butler County.

NOTE.

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.

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.]

McCall, G. H. & Co.
Butler Co

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLERS.)

No. 113

INDIGENT

SOLDIER'S PENSION
1904.

Name Charles McCall
County Butler

Co. B. 35th Regiment
Infantry

WARRANT ISSUED

120 1904

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

McCall
JAMES W. LINDSEY, STATE PRINTER, ALBANY.

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 _____, 1904.

[L. S.]

Executed in the presence of _____

McCallie Bros & Co.
Gulton Co.

CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. *113*

INDIGENT

SOLDIER'S PENSION
1904.

Name *Charles McCallie*

County *Gulton.*

Co. *B. 35* Regiment *Infantry*

WARRANT ISSUED

430 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

647

JOHN W. LINDSEY, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears Chas. R. McCalla

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 5 day of April 1845; 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 & 7 mos in Company B, of 95th Regiment of Sea Regt; 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 _____ 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, _____ Ordinary of said County, do certify that I am well acquainted with Chas. R. McCalla the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____

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, of hereby authorize

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

at

by day of 1905.

[L. S.]

Executed in the presence of

McCalla, Charles C.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

No. 68

INDIGENT

SOLDIER'S PENSION
1905.

Name Charles C. Calla
County Fulton
Co. 35th La

WARRANT ISSUED

1905.

418

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Calla

THE PENSION PROVIDED BY AND FOR THE USE OF THE STATE OF GEORGIA.

no date

McCalla, Charles C.
Fulton Co.

(FOR THOSE ALREADY ENROLLED.)

No. 730

INDIGENT

SOLDIER'S PENSION
1906.

Name Charles C. Calla
County Fulton
Co. 35th La

WARRANT ISSUED

1906.

712

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Calla

THE PENSION PROVIDED BY AND FOR THE USE OF THE STATE OF GEORGIA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I, of hereby authorize

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

at

by day of 1906.

[L. S.]

Executed in the presence of

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears, Charles McCalla

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 4 yrs in Company B, of 38th Regiment of La.; that his physical condition is as follows: Infirmary 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 the _____ day of _____, 1905.

Ordinary.

STATE OF GEORGIA,

County.

I, _____ Ordinary of said County, do certify that I am well acquainted with Charles McCalla the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____ 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,

County.

Personally appears, Charles McCalla

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 _____, 1894; that he is 61 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company B, of 38th Regiment of La.; that his physical condition is as follows: Infirmary 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 Full County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the _____ day of _____, 1906.

Ordinary.

State of Georgia,

County.

I, _____ Ordinary of said County, do certify that I am well acquainted with Charles McCalla the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____ 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 _____

1905.

[L. S.]

Executed in the presence of _____

1905 SECTION 1234.

(FOR THOSE ALREADY ENROLLED.)

No. 68

INDIGENT

SOLDIER'S PENSION

1905.

Name *John W. Lindsey*
County *Franklin*
Co. *25* Regiment *35th Va.*

WARRANT ISSUED

1905.

118

JOHN W. LINDSEY,

Commissionary of Pensions

WARRANT HANDED TO

Chas. R. Calla

no date

McCalla, Charles R.
Name *Charles R. Calla*
County *Franklin*
Co. *25* Regiment *35th Va.*

(FOR THOSE ALREADY ENROLLED.)

No. 238

INDIGENT

SOLDIER'S PENSION

1906.

Name *John W. Lindsey*
County *Franklin*
Co. *25* Regiment *35th Va.*

WARRANT ISSUED

1906.

47

JOHN W. LINDSEY,

Commissionary of Pensions

WARRANT HANDED TO

Chas. R. Calla

1906 SECTION 1234.

(FOR THOSE ALREADY ENROLLED.)

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 _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears Charles McCalla

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 87 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 4 yrs in Company B, of 85th Regiment of Geo; that his physical condition is as follows: infirmary 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 the 6th day of JAN, 1905.

Ordinary.

STATE OF GEORGIA.

County.

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

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

Ordinary _____ County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

County.

Personally appears Charles McCalla

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 87 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 4 yrs in Company B, of 85th Regiment of Geo; that his physical condition is as follows: infirmary 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 the 6th day of JAN, 1906.

Ordinary.

State of Georgia,

County.

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

Given under my official signature and seal, this _____ day of _____, 1906.

Ordinary _____ County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

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 _____

*McColla, Charles R.
 Trustee*

Great Seal of 1864.
 (FOR THOSE ALREADY ENROLLED)

No. *414*

INDIGENT

SOLDIER'S PENSION
 1907.

Name *Charles McColla*

County _____

Regiment _____

WARRANT ISSUED

14p 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

McColla
 JOHN W. LINDSEY, SECRETARY, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

County, }
Personally appears Thos McCalla of Milton
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 1887; that he is 61 years old
and by occupation a MC, 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 for the term of 4 yrs in Company B, of 38th Regiment
of GA; that his physical condition is as
follows: Infirmity + poverty

that his property consists of the following items:

of the value of none Dollars. I am now earning
by my labor, 4 Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the 6th day of July, 1907.

Thos McCalla
Ordinary.

State of Georgia,

County, }
I, Thos McCalla Ordinary of said County,
do certify that I am well acquainted with Thos McCalla
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 July, 1907.

Ordinary, Milton County.

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

I, J. C. [unclear] County.) Ordinary of said County,
do certify that I am well acquainted with Thos. McCalla
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 _____ 1907.

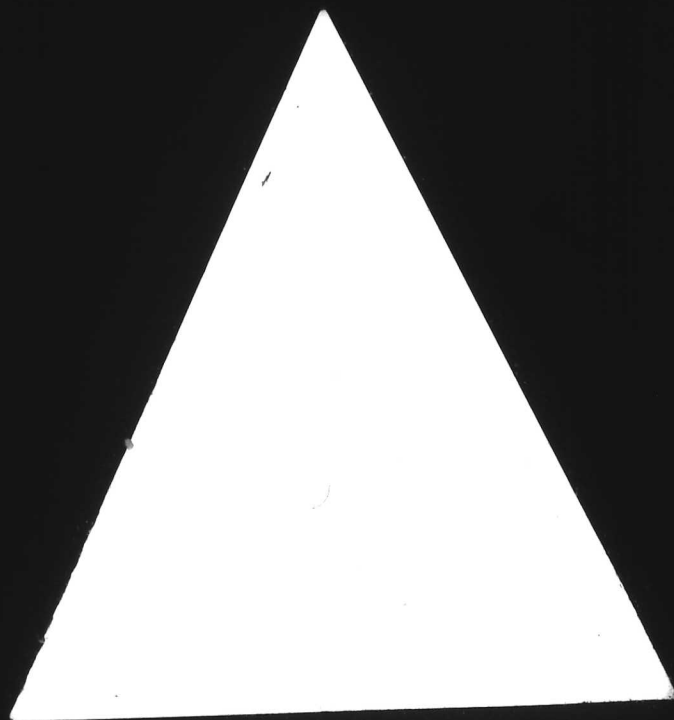


Ordinary _____ Newton County.

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

Georgia
Newton County } I, Jas M. DeLoach, Ordinary
do hereby certify that H. C. Carr of said
County is of trustworthy character,
and that his statements are entitled
to full faith and credit.
Given under my official signature
and seal of office.
This July 14th 1903.

Jas M DeLoach
Ordinary of
Newton County, Ga
~~[Signature]~~



State of Georgia, Fulton County.

To any Minister of the Gospel, Judge of Superior or Justice of the Peace to be called upon, I, the undersigned, authorized and permitted to join in the Honorable State of Georgia, do hereby certify that the above and foregoing are the true and correct copies of the marriage license and certificate of said Charles E. McClellan and Miss Susan J. Hagadale, as they appear of record in the County of Fulton, Georgia, and that this shall be a sufficient proof of the same.

Witness my hand and seal of office this 26th day of May

James E. T. Tamm, Clerk.

I, Charles E. McClellan and Miss Susan J. Hagadale were joined together in Holy Matrimony this 26th day of May 1870, by me, Henry Strickland, M. G.

Minister, Fulton County.

I, James E. Tamm, Minister and ex-officio Clerk of the Court of Fulton County, do hereby certify that the above and foregoing are the true and correct copies of the marriage license and certificate of said Charles E. McClellan and Miss Susan J. Hagadale, as they appear of record in the County of Fulton, Georgia, and that this shall be a sufficient proof of the same.

Witness my hand and the seal of said Court of Ordinary at Toccoa Georgia, this the 26th day of August, 1870.

James E. Tamm
Ordinary & ex-officio Clerk of Court Ordinary
Fulton County, Georgia.

WIDOW'S AFFIDAVIT

STATE OF GEORGIA.

Fulton COUNTY.

Personally before me comes Susan Josephine McCalla of said County, who, after being duly sworn, says that she is the widow of Charles Remond McCalla to whom, in the County of Fulton State of Georgia she was married on the 26th day of May 1870 and that she remained his wife, and resided with him to the date of his death in April 17th 1879 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$6.00 in Fulton County for 1908 per annum, on account of being a soldier in Company B Regiment 35th Georgia Volunteers or State Militia.

That she is now a bona fide resident citizen of said County of Fulton and she has continuously resided since 1st day of May 1889.

Sworn to and subscribed before me, this the 27th day of August 1911
Charles E. Tamm, Ordinary
Fulton County.
Susan Josephine McCalla
447 Taylor St
Atlanta Ga

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

STATE OF GEORGIA.

Fulton COUNTY.

Personally before me comes James R. George of Fulton County known to be responsible and truthful persons residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Susan Josephine McCalla who made the foregoing affidavit, is the lawful widow of Charles Remond McCalla who died in Fulton County in said State of Georgia on 17th day of April 1879 and that she has not since remarried. That she became the wife of Charles Remond McCalla on the 26th day of May 1870, and that she and he had resided together as man and wife continuously since 26th day of May 1870, and that the Charles Remond McCalla was the same man who was on the pension roll of said State from Fulton County Georgia when he died.

Sworn to and subscribed before me, this the 27th day of August 1911
Charles E. Tamm, Ordinary
Fulton County.
James R. George

Witness my hand and the seal of said Court of Ordinary at Tazewell Georgia, this the
22nd day of August, 1919.

James R. George
Ordinary & ex-officio Clerk Court Ordinary
Tazewell County, Georgia.

of ~~their~~ own personal knowledge Mrs. ~~Elizabeth~~ *Elizabeth* who made the foregoing
affidavit, is the lawful widow of *Charles Remondet M. Cilla* who died in *Tazewell*
County in said State of *Georgia* on *17th* day of *April* 19*09*
and that she has not since remarried. That she became the wife of *Charles Remondet M. Cilla*
the *24th* day of *May* 18*70*, and that she and he had resided together as man and
wife continuously since *24th* day of *May* 18*70*, and that the *Charles Remondet M. Cilla* was
the same man who was on the pension roll of said State from *Tazewell*
County *Georgia* when he died.

Sworn to and subscribed before me, this the

22 day of *August* 19*19*
Charles Remondet M. Cilla Ordinary
of *Tazewell* County.

(SEAL)

James R. George

Wm. S. Samuels (H. H. H.)
for Kate L.
Widow of Samuels

No. *124*

Widow's Application

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

County *Tullon*

Name *Mrs. B. McCann*

Widow of *B. McCann*

Approved

J. W. LINDSEY,
Commissioner of Pensions

Chas. P. Hyrd, State Printer, Atlanta.

[Signature]

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA.

Fulton County.

Personally before me comes
who, after being duly sworn, on oath says, that she is the widow of *S. B. McEany* of said County,
in the County of *Murray* State of *Georgia*, she was married on the *29*
day of *Oct.* 18*88* and that she remained his wife, and resided with him to the date of his death
in *May* 19*84* and that she has not since his death remarried. At the time of his death
he was a resident of *Floyd* County, in *middle* said State of *Georgia*, and he
was on the Pension Roll of the State and paid a pension of \$ *60*
in *Floyd* County for 19 *84* per annum on account of being a soldier in Company
Regiment *60th Georgia* (Volunteers of State Militia.)

At the death of *S. B. McEany* he was in the use and possession of the following
property *None*

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	\$
Horses and Mules	\$
Hogs, Cows, etc	\$
Total Cash value of all property	\$

That she is now a bonafide resident citizen of said County of *Fulton* and she
has so continuously resided since *17* day of *July* 19 *87*

Sworn to and subscribed before me, this *22nd* day of *July* 19*06* *Ans D D McEany*
Marcellus Anderson 66 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 comes *Stephen D. S. Parker* 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 *Mr. S. B. McEany* who made the foregoing affidavit, is
the lawful widow of *S. B. McEany* who died in *Floyd* County in
said State of *Georgia* on *29* day of *May* 19 *84* and that she
has not since remarried. That she became the wife of *S. B. McEany* on the *29*
day of *Oct.* 18 *88* and that she and he had resided together as man and wife continuously since
29th day of *Oct.* 18 *88* and that the said *S. B. McEany* was the
same man who was on the pension roll of said State *Georgia* from *Floyd* County
19*04* when he died.

Sworn to and subscribed before me, this *22nd* day of *July* 19*06* *Ans D D McEany*
Marcellus Anderson 66 Ordinary.
of *Fulton* County.

Widow's Application

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

County *Fulton*

Name *Ans D D McEany*

Widow of *S. B. McEany*

Approved

J. W. LINDSEY,
Commissioner of Pensions

Form 17 (REVISED) TWENTY NINTH

Copy of License

State of Georgia } To any judge justice of
Murray County } The Superior Court
justice of the Peace or
Minister of the Gospel you are
entitled to give Samuel B
McClary and Miss Kate L. Carter in the
Holy State of matrimony according
to the laws of this state and you
are required to return this License
to me with your certificate
as to the fact and the time of the
marriage entered thereon
witness my hand and official
signature this 24 day
of October 1868

Anderson Farnsworth
Ordinary

I hereby certify that
The Parties named in the above
License were duly joined in
matrimony by me this 29 day of
October 1868

J. M. Richardson M. C.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Tulsa

County.

Personally before me comes Edman H. Parker who after being sworn on
oath says, that they are freeholders of said County, and that they know Mrs. B. B. McCarty of
said County and knew her said husband S. B. McCarty at his death on the 13
day of May 1904 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: none

of the value of \$

Sworn to and subscribed before me, this the
27th day of May 1904
Marcellus Anderson Ordinary.
of Tulsa County.

Edman H. Parker
Ordinary.
County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Tulsa

County.

Marcellus Anderson Ordinary of said County, do certify, that I
know Mrs. B. B. McCarty the applicant for this pension and that she is the person
she represent herself to be, and that she is a bona fide continuing resident of said County and was on the
13th day of May 1904

That I also know Edman H. Parker witness as to marriage and I also know
Edman H. Parker 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 the County shows that none returned property to the
amount of none for 1908 \$ none for 1909 \$ none for 1910 \$

Sworn under my hand and official seal of office this 27th day of May 1904
(SEAL) Marcellus Anderson Ordinary.
Tulsa 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.

TO PAY-

1930.

\$1-

Che. & C. 11-15

10-15-30

Mc Conn. G.B. (mo) 257.75

For Fulton County

Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

The H. Giffles, Ordinary
For: Mrs. G. B. McCann
(Name of Pensioner)

Date of Death: Oct 4, 1934

Amount: \$ 7.00

PAID TO ORDINARY ON THIS CLAIM:

DATE	FUND FROM WHICH PAID	AMOUNT
10-28-34	Che. & C.	50.00
11-25-34	Che. & C.	127.00
11-25-34	Che. & C.	257.75
TOTAL		434.75

Approved, and ordered paid,

[Signature]
A. L. HENSON,
Director, Veterans Service Office.

H. M. PATTERSON & SON

Spring Hill at Fifth

ATLANTA, GA.

Oct 10, 1934

Sold to: For Funeral Expenses,
Mrs. Kate Carter McCann, WIFE of Mr. G. B. McCann
No. 1408 Lanier Place, S.W., Atlanta, Ga., 11-25-34

To Our Compl. to service including Tax \$ 127.00

WILL BE PAID TO YOU FOR YOUR CONVENIENCE.

Funeral Expenses, 1st Mile - Extra Charge	\$ 50.00
Flower Box	10.00
TOTAL	\$ 127.00

(State of Georgia) The above and foregoing account is rendered for
Funeral expenses of Mrs. Kate Carter McCann or Mrs. G. B. McCann,
as to one and the same person; who died without having sufficient
property to pay this bill.

H. M. PATTERSON & SON

By *[Signature]*
Member of Firm

Drawn to before me this

10th day of Nov., 1934 *[Signature]*

TO PAY-
1930. \$12.00
Cig. & C. Tax \$
TOTAL

FILE
C. L. HENSON

McCann, G. B. (Mrs)
Fulton Co. 257.75
For Fulton County

Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

This is Thos. H. Jeffries, Ordinary
For: Mrs. G. B. McCann
(Name of Pensioner)

Date of Death: Oct. 4, 1934

Amount: \$ 257.75

PAID TO ORDINARY ON THIS CLAIM:
(DATE) FUND FROM WHICH PAID

10/28/34	Che	50.00
11/15/34	Che	127.00
11/20/34	Che	57.75
TOTAL		234.75

Approved, and ordered paid,
By [Signature] 1934

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

11/15/34

H. M. PATTERSON & SON

Spring Hill at Fifth

ATLANTA, GA.

October 6, 1934

Sold to For Funeral Expenser,
Mrs. Cate Carter McCann, SAME AS Mrs. G. B. McCann
Res., 1468 Lanier Place, N.E., Fulton County, Atlanta, Georgia

To Our Complete Service Including Casket \$127.00

SPECIAL DISBURSEMENTS FOR YOUR CONVENIENCE

Hearse Mileage, 182 Miles - Extra Charge	20.50
Flower Car	10.25
TOTAL	\$257.75

State of Georgia) The above and foregoing account is rendered for
County of Fulton) funeral expenses of Mrs. Cate Carter McCann or Mrs. G. B. McCann,
who are one and the same person; who died without coming sufficient
property to pay this bill.

H. M. PATTERSON & SON

By [Signature]
Member of Firm

Sworn to before me this

17th day of Nov., 1934 [Signature]

Notary Public, 27 Lewis Atlanta, Ga.
My Comm. Expires June 28, 1935

Received of Thomas H. Jeffries, Ordinary, \$117.00, for the account
of Mrs. S. B. McCann. This amount has not previously
been paid and is now owing to me.

March 1925.

Atlanta, Georgia

Received of Thomas H. Jeffries, Ordinary, Ninety (\$90.00) Dollars
to apply on the funeral of Mrs. S. B. McCann.

H. M. Patterson & Son
by J. E. Bowen

Received of Thomas H. Jeffries, Ordinary, \$40.75.
to apply on account of Mrs. S. B. McCann.
I certify that this account has not been paid and is now owing to me.
This 2 day of Sept 1926.

H. M. Patterson & Son
J. E. Bowen

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 J. E. Bowen for
H. M. Patterson & Son, of said County, who, after being duly sworn, on oath says
that he knew Mrs. S. B. McCann, late of said County, a Confed-
erate 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~~ NO ESTATE of
ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted
to the sum of \$ 257.75, as shown by sworn statements FULLY and COMPLETELY
ITEMIZED, hereto attached.

Sworn to and subscribed before me,
this the 8 day of Nov, 193 4.
W. B. Patterson Ordinary.

J. E. Bowen for H. M. Patterson & Son

CERTIFICATE OF THE ORDINARY

GEORGIA, Fulton County:

I certify that J. E. Bowen 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. S. B. McCann, 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 de-
ceased 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 8 day of Nov, 193 4.
(Seal of Ordinary) W. B. Patterson, 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 each 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.

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

at _____ day of _____ 190__

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

[L. S.]

Executed in presence of _____

McCord, C. H.
McCord
McCord Co.
No. _____

INDIGENT PENSION.
1906.

Name *Ed. M. Candler*
County *Paulding*
Co. *B-572 N. C.* Regt.
Approved _____ 190__

JOHN W. LINDSHY,
Commissioner of Pensions.

WARRANT HANDED TO _____

Ordinary will write name of Applicant, Company
and Regiment on back as indicated above.
Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr.,
Atlanta, Georgia.

4/10-1906

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

190

[L. &]

Executed in presence of

INDIGENT PENSION.

1906.

Name John W. Lindsey

County Fulton

No. 6573 N. C. Regt.

Approved 190

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordinary with duty of (1) to receive and receipt for the pension allowed and request that he remit same to

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

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

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

4/18-1906

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

I, John W. Lindsey of said State and County, desiring to avail himself of the Pension Act (Section 1234, 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.)

John W. Lindsey, Jr., 800 N. 1st St., Atlanta, Fulton Co., Ga.

2. How long and since when have you been a resident of this State?

Since 1898

3. When and where were you born? Dec. 4, 1831 - in Spauld Co. Ga.

4. When and where and in what company and regiment did you enlist or serve?

Dec. 1, 1861 - Co. H. 1st Va. Cavalry Volunteers.

5. How long did you remain in such company and regiment?

From June

6. When and where was your company and regiment surrendered and discharged?

Apr. 1865 - near Richmond, 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? Was at home around 1864 - under guard.

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

10. What has been your occupation since 1865? Farmer.

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty,"

second, "infidelity and poverty," or third, "blindness and poverty"? First & Second

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third,

state whether you are totally blind and when and where you lost your sight? For last few years - suffering in body & mind, & was able to take care of half

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

None

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same? None

15. In what County did you reside during those years, and what property did you then return for taxation?

In Fulton Co., Ga. - returned nothing.

16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905?

By the labor of my wife

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 no time have I contributed anything.

18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year?

No employment

19. Have you a family? If so, who comprises such family? Give their means of support. Have they a home,

stead, or other property? Their ages and how employed? My wife is the only laborer in family - keeps 22 negroes - temper - land in Fulton Co. Ga. - about 40 years old -

20. Are you receiving any pension? If so, what amount and for what disability?

No

21. Have you ever made an application for pension before? No

22. How many applications have you ever made and under what class? None

Sworn to and subscribed before me this the

3rd day of May, 1906.

John W. Lindsey Ordinary.

of

Fulton

County.

Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

John C. McDaniel of said State and County, having been presented as a witness in support of the application of John C. McDaniel 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?
No. 49 Station St. Savannah Ga.
2. Are you acquainted with A. H. McCandless the applicant? If so how long have you known him?
18 years
3. Where does he reside, and how long and since when has he been a resident of this State?
No. 12 Auburn St. Savannah 19 years
4. What, where and in what company and regiment did he enlist, and how do you know?
In 57th N. C. Regiment, Co. B. 1861-1862: a mounted infantry company
5. Were you a member of the same company and regiment?
No.
6. How long did he perform regular military duty?
4 years
7. When and where was his command surrendered?
at Fort Mifflin, Pa. in 1863
8. Were you present when it surrendered?
No.
9. Was applicant present?
No.
10. If he was not present, where was he?
at home in Savannah
When did he leave his command?
In 1864 For what cause?
Wounded
By what authority he left?
Under orders How do you know all of this?
By friend McDaniel's representation of applicant
11. What property, effects or income has the applicant? (Give your means of knowledge)
No - In observation & knowledge of applicant
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?
None
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
No
14. What is the applicant's occupation and physical condition?
Family physician
But mental & physical condition
15. Is the applicant unable to support himself by labor of any sort; if so, why?
Yes - Not able to work due to paralysis
16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905?
By his wife
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.
General mental & physical weakness, constant with infirmities of age
19. Who comprises family? What property have they? Children's age and their earning capacity?
Just applicant's wife & 2 children. Wife has a small tract of unimproved land in Fulton Co. Ga.
20. What interest have you in the recovery of a pension by this applicant?
None
Sworn to and subscribed before me, this 31st day of Jan, 1906.
John B. Leatley Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA:

Fulton COUNTY.

Personally came before me, B. B. Sewell M.D. and John C. McDaniel, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully A. H. McCandless applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

On account of age and physical condition he is unable to do any work. His mind is failing and he is not likely to be able to do anything to help support himself & wife.

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

Sworn to and subscribed before me, this 31st day of Jan, 1906.
John B. Leatley Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton COUNTY.

I, John B. Leatley Ordinary, in and for said County, hereby certify that the applicant, A. H. McCandless resides in said County, and has been a bona fide resident of this State since the 1st day of Jan, 1868, and that the witnesses, viz., John C. McDaniel and B. B. Sewell 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 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 31st day of Jan, 1906.
John B. Leatley 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.

State of North Carolina)
Rowan County) In the Superior Court.

Be it remembered that on this the 26th day of March 1906, before the undersigned, J. F. McCubbin, Clerk of the Superior Court for the State and county aforesaid, personally appeared F. A. McCorkle, who being duly sworn, deposed and asith that he was a member of Co. H. 57th Regiment N.C. State Troops, and that he was well acquainted with A. W. McCandlees now residing in Atlanta Ga. and that the said A. W. McCandlees was a member of said Co. and Regiment and served faithfully as such until he was wounded and sent home on furlough. The deponent further asith that the roster of N.C. State Troops shows that the said McCandlees was a Corporal (First) and enlisted on July 14th 1862. Witness my hand and seal this 26th day of March 1906.

Sworn and subscribed before me)
this 26th day of March 1906.)
J. F. McCubbin)
Clerk Superior Court.)

F. A. McCorkle





NOTES.

In order to avoid unnecessary delay to applicants, and to enable all parties interested to understand the law granting allowances to disabled soldiers and sailors, the following suggestions are submitted for the Governor touching the payments provided the following suggestions are submitted.

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

2. An applicant makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and permanently useless.

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

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

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

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

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

McLann, Patrick
Fulton Co.
W. C. Carr, Patrick

No. 2780

APPLICATION FOR ALLOWANCE

Law of right Arm
Applicant, Patrick, Conn.

County, Fulton

Amount, 100.

Date of Warrant July 15/

Entered on Record

July 15, 1864

A. A. H.

SECRETARY EXCISE DEPARTMENT

Applicant

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

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

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

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

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

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

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

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

STATE OF GEORGIA.

9. Shelby County 11-2-23 10-11-23

PERSONALLY appears Pat McNamee of Williston 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 _____ day of
March 1866 that he enlisted in the military service of the Con-

federate States (~~of the Confederate~~) during the war between the
States, and served as a private in Company F, of 6th Regiment
of Louisiana Volunteers Taylor's Brigade; that whilst engaged
in such military service, at the battle of Gettysburg he fell in the State
of Pennsylvania on the 30th day of July 1862 - he was
wounded as follows: Gun shot wound in right
hand causing the amputation of
the right arm above the elbow
- Arm amputated under

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

Sworn to and subscribed before me, this the 9th day of February, 1889 } Post McGowan
W. L. McAlister
NOTE: State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

STATE OF GEORGIA.

PERSONALLY came before me _____ of the county _____ of _____ State of Georgia, who, being duly sworn says that he was _____ in Company _____ of _____ Regiment of _____ Volunteers, and that deponent knows _____, and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said _____ as stated by him in said affidavit. Deponent further states that said _____ is a *bona fide* citizen of this State and resides in _____ county.

Sworn to and subscribed before me, this _____

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

STATE OF GEORGIA,

Laurens
County

PERSONALLY came *John H. Murray* late Co. E. 6th La. Regt
Edward Flood late Co. K. 6th La. Regt & *Patrick McLean*
citizens of *Paul of Orleans* county, in said State,
who, being duly sworn, say that they are acquainted with *Patrick McLean*
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 *Atlanta*, *Durston* county, and we
are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this

11th day of *July*, 1889

J. D. Bayler
Notary Public

John H. Murray 9th E. 6th La. Regt
Edward Flood Co. K. 6th La. Regt
Patrick McLean of 6th La

STATE OF GEORGIA,

Fuller County

PERSONALLY comes before me *W. L. Williams* Ordinary of said county,
and *Patrick McLean*, both known to
me as reputable physicians of said county, who, being severally sworn, say on oath that
they have carefully examined *Patrick McLean*, and after such
examination say that the applicant has been injured as follows:

By gunshot wound which caused amputation
of right arm above the elbow
W. L. Williams
J. W. Smith

Sworn to and subscribed before me, this

15th day of *July*, 1889

W. L. Williams
Ordinary

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

STATE OF GEORGIA,

Fuller County

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

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

Given under my official signature and seal, this 15th day of *July*, 1889
W. L. Williams
Ordinary *Fuller* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fuller 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 ser-
vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
authorizing my said attorney to receipt in my name for any Warrant that may be issued by
the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have herunto set my hand and seal, this
day of _____ 1889

Executed in the presence of us: _____ (L.S.)

STATE OF GEORGIA,

Fuller County.

I, W. L. Lealson Ordinary of said county, do certify that I am well acquainted with Pat McLean 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 1st day of April 1890

W. L. Lealson

Ordinary

Fuller

County.

STATE OF GEORGIA,

Fuller County.

I, W. L. Lealson Ordinary of said County, do certify that I am well acquainted with Pat McLean 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 17th day of Feb 1891

W. L. Lealson

Ordinary

Fuller

County.

McLean, Pat
Fuller Co

1890.

McLean, Pat

No. 2662
APPLICATION FOR ALLOWANCE.

FOR THE YEAR ENDING DECEMBER 31, 1890.

Pat McLean
Applicant.

County, Fuller

Amount, 100

Date of warrant, April 11

Entered on record

April 1 1890

Pat McLean

Applicant

WARRANT ISSUED TO

Applicant

Fuller Co
McLean, Pat
1891

PAID 1891.

No. 1192

Application for Allowance

FOR THE YEAR ENDING DECEMBER 31, 1890.

Pat McLean
Applicant.

County, Fuller

Amount, 100

Date of Warrant, Jul 19

Entered on record

July 19 1890

WARRANT ISSUED TO

Applicant

WARRANT ISSUED TO

Applicant

WARRANT ISSUED TO

Applicant

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Milledgeville County.

PERSONALLY appears *Pat McLean* of *Milledgeville* County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the day of *1863*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *F*, of *6*th Regiment of *La* Volunteers *Keag's*'s Brigade; that whilst engaged in such military service, at the battle of *Shiloh* in the State of *La*, on the *1st* day of *July*, 1862, he was wounded as follows: *from shot wound of the right arm causing amputation of the arm at the elbow*

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 *one hundred* dollars.

Sworn to and subscribed before me, this the *1st* day of *April*, 1890, at *Milledgeville*.
W. L. McLean

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,

Milledgeville 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 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 *1st* day of *April*, 1890.

Executed in the presence of us:

[L. S.]

Send money to me as follows, by

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Milledgeville County.

PERSONALLY appears *Pat McLean* of *Milledgeville* 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 *1863*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *F*, of *6*th Regiment of *La* Volunteers *Keag's*'s Brigade; that whilst engaged in such military service at the battle of *Shiloh* in the State of *La*, on the *1st* day of *July*, 1862, he was wounded as follows: *from shot wound of the right arm causing amputation of the arm at the elbow*

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 *one hundred* dollars, for *1891*.

Sworn to and subscribed before me, this the *19th* day of *Feb*, 1891, at *Milledgeville*.
W. L. McLean

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,

Milledgeville County.

Know all Men by these Presents, That I,

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 *19th* day of *Feb*, 1891.

Executed in the presence of us:

[L. S.]

Send money to me as follows, by

to

County, Georgia.

P. O.

STATE OF GEORGIA.

County,

I, _____ Ordinary of said county,
do certify that I am well acquainted with _____ the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and 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 _____ day of _____ 189 _____

Ordinary.

County.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING AT TWENTY 20, 1892.

Name Pat McGinn
County Wilkes
Disability Loss of arm
Amount \$ 1.00
Entered on record March 17 1892.
W. H. HARRISON,
Secretary of Economic Department
AGENT.
Applicant

POWER OF ATTORNEY.
STATE OF GEORGIA, }

County, }

Know all Men by these Presents, That I _____
of _____ 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
_____ day of _____ 189 _____

Executed in the presence of us: _____

DIRECTION.

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

Mc Carr, Pat
Hutton & Co

1893.

Guthrie

No. 1713
Application for Allowance

For the Year Ending October 20, 1892.
Last of 1892
Applicant, Pat McGinn
County, Wilkes
Amount, \$ 1.00
Date of Warrant, 3/17
Entered on record, 3/17 1893.

W. H. HARRISON to
Secretary of Economic Department
Applicant
W. H. HARRISON, Secretary of Economic Department.

Pat McGinn

STATE OF GEORGIA.
FOR APPLICANTS HEREIN ALLOWED PENSIONS.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Hullon County, }
PERSONALLY appears *Pat McEban*
of *Hullon* County, State of Georgia, who, being duly sworn, says
on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously
since the _____ day of _____ 1866; 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 *F*,
of *6*th Regiment of *La* Volunteers *Hoag*'s
Brigade, that whilst engaged in such military service at the battle of *Malvern Hill*
in the State of *Virginia*, on the _____ day of _____ 1862, he was wounded as follows:

He was wounded as follows: Shot in the right arm causing the amputation of the arm above the elbow.

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

One hundred Dollars for *1891*

Sworn to and subscribed before me this *17* day of *March* 1892

W. B. Boulton Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

Know all Men, by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Hullon County, }

PERSONALLY appears *Pat McEban* of *Hullon* 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 _____ 1866; 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 *F*, of *6*th Regiment of *Louisiana* Volunteers *Hay*'s Brigade; that whilst engaged in such military service at the battle of *Malvern Hill* in the State of *Virginia*, on the _____ day of _____ 1862, he was wounded as follows:

gunshot wound of right arm causing the amputation of the same above the elbow

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

One hundred dollars, for *1891*

Sworn to and subscribed before me, this, the *17* day of *March* 1892

W. B. Boulton 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,

Hullon County, }

I, *W. B. Boulton* Ordinary of said County,

do certify that I am well acquainted with *Pat McEban* 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 *17* day of *March* 1892.

W. B. Boulton

Ordinary *Hullon* County.

RECEIVED BY

BOMER OF ALLOBIEX

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 hereunto 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.

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 hereunto 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.

Soldier's Pension. 1894.

Name Pat McGann
County Fulton
Disability Loss of Arm
Amount, \$ 100.
317
1894.
W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO

McGann Pat
Fulton Co.

(For Those Already Enrolled.)

No. 102

SOLDIER'S PENSION. 1895.

Name Pat McGann
County Fulton
Disability Loss of Arm
Amount, \$ 100.
317
1895.
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

McGann Pat
Fulton Co.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County.

PERSONALLY appears Pat McGinn 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 55; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company , of 8 th Regiment of Louisiana Volunteers Hay 's Brigade; that whilst engaged in such military service at the battle of Malvern Hill in the State of Virginia, on the 1st day of July 1862, he was wounded as follows: gun shot wound of right arm causing the amputation of the arm above the elbow

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

Sworn to and subscribed before me, this, 15th 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 Pat McGinn the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15th day of March 1894.



W. L. Calhoun

Ordinary, Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County.

PERSONALLY appears Pat Moran 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 55; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company , of 8 th Regiment of Louisiana Volunteers, 's Brigade; that whilst engaged in such military service at the battle of Malvern Hill in the State of Virginia, on the 1st day of July 1862, he was wounded as follows: gun shot wound of right arm causing the amputation of the arm above the elbow

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

Sworn to and subscribed before me, this, 15th day of March 1895, 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 Pat Moran the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15th day of March 1895.



W. 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

1896.

[L. S.]

Executed in presence of

(For Those Already Enrolled.)

No. 503

SOLDIER'S PENSION.

1896.

Name Pat McLean

County Fulton

Disability 100

Amount, \$ 100

3/2

1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

11/2/20

McCann, Pat

(For Those Already Enrolled.)

No. 670

INVALID

SOLDIER'S PENSION.

1897.

Name Pat McLean

County Fulton

Disability

Amount, \$ 100

2/25

1897.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

11/2/20

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.

Personally appears Pat McCan 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 18th; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company of 1st Regiment of Louisiana Volunteers, 1st Brigade; that whilst engaged in such military service in the State of Virginia, on the 1st day of 1861, he was wounded, injured or diseased as follows: *shot in the right arm causing the amputation of the same above the elbow*

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 24th, 1893. I have heretofore as a resident of Fulton County been allowed a pension of One Hundred dollars, for the year 1890.

Sworn to and subscribed before me, this, 26th day of May, 1896, *W. L. Galbourn* Ord.

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, W. L. Galbourn, Ordinary of said County, do certify that I am well acquainted with Pat McCan, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 May, 1896.



Ordinary, Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.

Personally appears Pat McCan 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 1866; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company of 6th Regiment of Louisiana Volunteers, 1st Brigade; that whilst engaged in such military service in the State of Virginia, on the 1st day of 1861, he was wounded, injured or diseased as follows:

Gun shot wound of right arm causing the amputation of the same above the elbow.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 24th, 1897. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of One Hundred dollars, for the year 1890.

Sworn to and subscribed before me, this, 26th day of May, 1897, *W. L. Galbourn* 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, W. L. Galbourn, Ordinary of said County, do certify that I am well acquainted with Pat McCan, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 May, 1897.



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 _____

McCann, Det.
Hulton

ACT OF JUNE 1, 1862.

(For Those Already Enrolled.)

No. 1035

INVALID

SOLDIER'S PENSION.

1898.

Name *Det. McCann*
County *Hulton*
Disability *Low Rank*
Amount, \$ *100.00*

2/8 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

appk

W. H. HARRISON, STATE ARCHIVE, ATLANTA.

McCann

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 _____

McCann, Det.
Hulton

CODE SECTION 126

(For Those Already Enrolled.)

No. 1879

INVALID

SOLDIER'S PENSION.

1899.

Name *Det. McCann*
County *Hulton*
Disability *Low Rank*
Amount, \$ *100.00*

3/1 1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

appk

W. H. HARRISON, STATE ARCHIVE, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *Pat McLean* 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 *1866*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *F*, of *6th* Regiment of *Louisiana* Volunteers, *Ray's* Brigade; that whilst engaged in such military service in the State of *Virginia*, on the *1st* day of *1861*, he was wounded, injured or diseased as follows:

Gun shot wound to right arm causing the amputation of the same above the elbow.

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

Sworn to and subscribed before me, this, *Pat McLean* day of *Feb*, 1898. 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, *H. J. Hulley* Ordinary of said County, do certify that I am well acquainted with *Pat McLean* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *8th* day of *February*, 1898.



Ordinary *Fulton* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *Pat McLean* 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 *1866*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *F*, of *6th* Regiment of *Louisiana* Volunteers, *Ray's* Brigade; that whilst engaged in such military service in the State of *Virginia*, on the *1st* day of *1861*, he was wounded, injured or diseased as follows:

Gun shot wound right arm causing amputation above elbow.

Deponent makes application for the pension to which he is entitled for the year ending October 24th, 1898. I have heretofore under said law as a resident of *Fulton* County been allowed an invalid pension of *\$ 100.00* Dollars, for the year 1897.

Sworn to and subscribed before me, this, *Pat McLean* day of *Feb*, 1898. 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, *H. J. Hulley* Ordinary of said County, do certify that I am well acquainted with *Pat McLean* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *27* day of *Feb*, 1898.



Ordinary *Fulton* County.

of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 5th
day of February 1898.



Ordinary Fulton County.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 2nd

day of February 1898.



Ordinary Fulton County.

STATE OF GEORGIA,

Fulton County.

I, W. L. Caldwell Ordinary of said county,
do certify that I am well acquainted with Pat McCan 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 17th day of March 1898

W. L. Caldwell

Ordinary.

Fulton

County.

United States of America.

STATE OF LOUISIANA.

PARISH OF ORLEANS---CITY OF NEW ORLEANS.

I, *Edgar A. Luminias* Clerk
of the Civil District Court for the Parish of Orleans, State
of Louisiana, (which Court is a Court of Record, having
original civil and probate jurisdiction), do hereby certify that

J. D. Payton
whose genuine signature is affixed to the certificate which
forms a part of the annexed written instrument, was on the
Eleventh day of

July 1889. and is still a Notary Public
in and for the Parish of Orleans, State of Louisiana, duly com-
missioned and qualified, and as such Notary Public, under the
laws of the State of Louisiana, is duly authorized and em-
powered to administer oaths, take depositions, receive acknowl-
edgements of execution of and signatures to all deeds, mort-
gages or other instruments in writing, and to all his official
acts as such due faith and credit are due and owing

In Testimony Whereof, I hereunto set my hand
and affixed the impress of the seal of said
Civil District Court, at the City of New
Orleans, La., on this *11*
day of *July* 1889, and
of the Independence of the United States
of America the one hundred and *12*

Edgar A. Luminias
clerk

Wm. B. Smith
July 15
1889

Audited *July 15* 1889
Wm. B. Smith
COMPTROLLER GENERAL

July

Maimed Soldiers.

Voucher No. *24180*

Amount \$ *100.*

Paid to *Patrick McCann*

For *Loss of right arm*

July 26th 1889.

Included in warrant No.

issued to Treasurer

1889.

WARRANT CLERK.

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

Applicant

Audited

18

Maimed Soldiers.

Voucher No. *2662*

Amount \$ *100.*

Paid to *Pat. McCann*

For *Loss of arm*

April 1 1890.

Included in warrant No.

issued to Treasurer

18

WARRANT CLERK.

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

Applicant

No. 2080

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.

Atlanta, Ga. July 15 1889.

Mr. Patrick McCann 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. 29, 1888, and the same having been allowed for

Loss of right arm. He is entitled to receive the sum of One Hundred & 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,

W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

100
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100

per above voucher, this

15th of July

Pat McCann

Dollars,

1889.

No. 2662

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.

Atlanta, Ga. April 1 1890.

Mr. Pat. McCann 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

Loss of arm. He is entitled to receive the sum of One Hundred & 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,

W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

\$ 100.00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100 Dollars,

per above voucher, this

1st of April 1890.

Pat McCann

One Hundred & 00/100
per above voucher, this 15th of July
Pat McCann

Dollars,
1889.

One Hundred & 00/100
per above voucher, this 1 of April 1890.
Pat McCann

Dollars,

McCann, Pat

Just

1891.

Maimed Soldiers.

Voucher No. 1192

Amount \$ 10 00

Paid to Pat McCann

For Loss of arm

July 19 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

Audited.

1891.

COMPTROLLER GENERAL.

1891.

No. 1192

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.

Atlanta, Ga. July 19 1891.

Mr.

Pat McCann

of the County

of

DeKalb.

having filed his application in the Executive

Department for an allowance under the Act approved October 24, 1887, as amended by Acts approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for

Loss of

He is entitled to receive the sum of One Hundred 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.

H. J. Hardeman
GOVERNOR.

By the Governor,

W. N. Harrison

Sec'y EXECUTIVE DEPARTMENT.

\$100

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

One Hundred & 00/100 Dollars.

per above voucher, this 19 of July 1891.

Pat McCann

W. H. Harrison

Sec'y EXECUTIVE DEPARTMENT

\$100 --

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

One Hundred & no/100

Dollars.

per above voucher, this

19

of

July

1891.

W. H. Harrison

Mc Carley, Martha A.
Widow (Mc Carley)
675 Gordon St

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 *Mrs Martha A McCarley*
Widow of *Thos J McCarley*
Company *A 9th Sa Bn 16*
Approved *Military*

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

J. W. LINDSEY,
Commissioner of Prisons

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.

Name Mrs. Martha A. McCauley
Widow of Thos. J. McCauley
County Rock
Approved Attorney

Widow's Application

No.

W. C. Lindsey, Clerk
of the Board of Prisons
at Atlanta

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Fulton County.

Personally before me came Mrs. Martha A. McCauley of said County, who, after being duly sworn, on oath says, that she is the widow of Thos. J. McCauley to whom in the County of Rock State of Georgia she was married on the 26th day of January 1867 and that she remained his wife, and resided with him to the date of his death in May 1917 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 Pension Roll of the State and paid a pension of \$70.00 in Fulton County for 1917 per annum, on account of being a soldier in Company A 9th Ga. Bn. Artillery Regiment. (Volunteers of State Militia.)

At the death of Thos. J. McCauley 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.)

<u>None</u>	Acres land	\$
<u>None</u>	Horses and Mules	\$
<u>None</u>	Hogs, Cows, etc	\$
<u>None</u>	Total Cash value of all property	\$

That she is now a bona fide resident citizen of said County of Fulton and she has so continuously resided since 1867 day of November 1916

Sworn to and subscribed before me, this the 17 day of Oct 1917 William R. MacIntyre 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 came J. C. Carlisle 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. Martha A. McCauley who made the foregoing affidavit, is the lawful widow of Thos. J. McCauley who died in Fulton County in said State of Georgia on 30th day of May 1917 and that she has not since remarried. That she became the wife of Thos. J. McCauley on the 26th day of Jan 1867 and that she and he had resided together as man and wife continuously since 1867 day of Jan 1867 and that the deceased was the same man who was on the pension roll of said State from Fulton County when he died.

Sworn to and subscribed before me, this the 17 day of Oct 1917 J. C. Carlisle Ordinary,
of Fulton County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

County.

Personally before me comes..... who after being sworn on oath says, that they are freeholders of said County, and that they know..... of said County and knew her said husband..... at his death on the..... day of..... 191..... that she and he were in the use, possession and control of the following property at his death to wit:.....

of the value of \$..... That she is now in the use, possession and control of the following property to wit:.....

of the value of \$..... Sworn to and subscribed before me, this the..... day of..... 191.....

Ordinary,

of..... County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I,..... Ordinary of said County, do certify, that, I know Mrs. R. M. M. as the applicant for this pension and that she is the person who represents herself to be, and that she is a bona fide continuing resident of said County and was on the..... day of..... 191.....

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

That the tax Books of..... County shows that..... returned property to the amount of \$..... for 1908 \$..... for 1909 \$..... for 1910 \$..... for 1911 \$..... for 1912 \$..... for 1913 \$..... for 1914 \$..... for 1915 \$..... for 1916 \$.....

Sworn under my hand and official seal of office this..... day of..... 191.....

(SEAL.)

Ordinary.

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.

\$.....for 1912 \$.....for 1913 \$.....for 1914 \$.....for 1915 \$.....for 1916

Sworn under my hand and official seal of office this 24 day of Oct 1917

(SEAL.)

William R. Marshall CC Ordinary.

Fuller County.

- NOTES 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked 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.

The surrender roll of Gen. Lee shows 9th Bat. Art. but the Company Roll of "A" does not contain the names of either the applicant or witnesses. Some mistake about this. Must explain and state where they were clearly, and account for them honorably to the close of the war.

J.W. Lindsey, Com. of Pensions.

W. H. Carley, Secy. of War
Fullton Co
10. H. Feb 1911
 No. _____

Confederate Soldier's Application.

UNDER ACT 1910.

County *Fullton*
 Name *J. H. Carley*
 Company *A*
 Regiment *9th Artillery*

Approved _____

J. W. LINDSEY
 Commissioner of Pensions

CHAS. E. STED, State Printer, Atlanta.

2/10/11

Pension Office, 11/23/70.

The surrender Roll of Gen. Lee shows 9th Bat. Art. but the Company Roll of "A" does not contain the names of either the applicant or witness. Some mistake about this. Must explain and state where they were clearly, and account for them honorably to the loss of the war.

J.W. Lindsey, Com. of Pensions.

Confederate

Soldier's Application.

UNDER ACT 1910.

County *Fuller*
Name *J. McCaskey*
Company *A*
Regiment *9th Artillery*
Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. J. BYRIN, STATE PRINTER, ATLANTA.

2/10/11

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Fuller County.

J. McCaskey of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office). *J. McCaskey, Atlanta Ga*
2. How long and since when have you been a continuous resident citizen of this State? *about 18 years since 5 Dec 1887*
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? *Yes*
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service). *March 27/62 = Atlanta A - 9th Artillery*
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge). *until surrendered about 3 years*
6. When and where was your Company and Regiment surrendered or discharged from the Service? *April 1865 - Appomattox Va*
7. Were you actually present with your Command when it was surrendered or discharged? *Yes*
8. If you were not actually present, state specifically and clearly where you were. *X*
- a. Where was your Command when you left it? *X*
- b. When did you leave the Command? *X*
- c. For what cause did you leave? *X*
- d. By whose authority did you leave? *X*
- e. For how long was your leave granted? In what way? *X*
- f. Why did you not return to your Command after leave expired? *X*
- g. In what way were you prevented? *X*
- h. What effort did you make to return? *X*
- i. Were you captured during the war? *X*
- j. If so, when, and where? In what prison were you held and when were you released? *X*
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 except small amount of money and some land effort worth about 3000*
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 except some held goods worth about 3000*
12. What annual or monthly income or earnings of yourself and wife and the source derived have you? *8.75 per month*
13. Are you drawing a pension of any amount from this State or the United States? *No*
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? *No*

Sworn to and subscribed before me, this the

26 day of *Sept* 1910, at *Atlanta* Georgia, I, *J. McCaskey* Ordinary, of *Fuller* County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

County.

J. D. Hagan of said State and County is hereby presented as a witness in support of the application of John F. McCarley for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? J. D. Hagan
Austell Cobb County
2. How long and since when have you known J. F. McCarley the applicant?
10 or 12 years ever since 1862
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Atlanta, Fulton Co. Ga
Ever since I know him
4. When, where and in what Company and Regiment did J. F. McCarley enlist during war from 1861 to 1865? (Give date and place) March 4th 1862 Chickasaw Co. Ga. 9th Art
5. How did you obtain your information of this Service? He was a member of the same Co. & Battalion
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) About 3 years, until April 9 1865
7. When and where was his Command surrendered or discharged (give date and place) April 9th 1865 - Appomattox Court House Va
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there? Yes was present
10. Was the applicant personally present with his Command at surrender? Yes
11. If not where was he and how came him there? He was present

12. When did he leave his Command? April 9 1865 Where was his Command when he left it? Appomattox Va for what cause did he leave? Surrender
- By whose authority did he leave? _____ and how long was he granted leave? _____ How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was present and in Company with applicant
13. In what way was he prevented from returning to his Command? _____ How do you know? _____
14. What effort did he make to return to his Command and how do you know? _____
15. Was applicant captured as a prisoner? No If so, when and where? _____
- If what prison was he held? _____ and when released? _____

Sworn to and subscribed before me, this the

19th day of April 1910

at Atlanta, Ga

of

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

County.

Personally before me comes A. Stewart & J. Hagan who on oath says that they are freeholders residing in said County and we know John F. McCarley 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) Stone house for rent in Atlanta
at about 300 \$

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? X
 3. What was the price paid or stated to be paid? X
 4. What relation is the party to applicant? X
 5. What disposition was made of the proceeds of the sale? X
 6. Was the disposition of this property made in good faith and full value? X
- or was it made to obtain a pension? X

Sworn to and subscribed before me, this the

12th day of Oct 1910

at Atlanta, Ga

of

County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

John F. McCarley Ordinary of said County, certify that I know the applicant John F. McCarley for Pension is the person he represents himself to be and resides in said County. That John F. McCarley the witness swearing to the service and A. Stewart & J. Hagan 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 John F. McCarley shows that _____ and wife value for tax in 1908 \$ 300 for 1909 \$ 300 for 1910 \$ 300

Sworn to by my hand and official seal of office this

13th day of Oct 1910

at Atlanta, Ga

of

County.

- NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: "You do solemnly swear that you will true answers make to each question asked you and the evidence you tell me shall be the truth before me and you are Oath."
2. Additional affidavits may be attached if such names are trustworthy.
3. A certificate shall be made before the Ordinary and returned by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

15. Was applicant captured as a prisoner? no If so, when and where? _____ and when released? _____

Sworn to and subscribed before me, this the _____ day of _____ 1910.

J. M. Carson
Ordinary

J. M. Carson
Ordinary
Fulton County
Sept 19-1910

value for tax is in 1908 \$ 200 for 1909 \$ 200 for 1910 \$ 200
Sworn to by my hand and official seal of office this 13th day of Oct 1910.

John R. Wilkinson
Ordinary

of Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall order applicant and all witnesses to 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 as you know it.
2. Additional affidavits may be attached if same spaces are insufficient.
3. All affidavits must be made before the Ordinary and verified by him.
4. If applicant has no property as all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

JOHN R. WILKINSON
ORDINARY
AND
JUDGE COURT OF ORDINARY,
FULTON COUNTY

Atlanta, Ga. _____ 19

State of Georgia
Fulton County
Personally appeared before the undersigned W. F. Brown who after being duly sworn says he is personally well acquainted with J. M. Carly who claims that said J. M. Carly enlisted with the Confederate Service in Co A 9th Ga Battalion of Artillery in early part of the war & he served until the surrender of his Command was surrendered at Appomattox, Va. in April 1865 & at the time of the surrender said J. M. Carly & myself together with 18 or 20 more men were detailed with the wagon train at Farmville Va. & had been engaged in this detail under proper orders from our Commanding Officer for about 3 weeks before the surrender & did not learn of the surrender for 4 or 5 days after it happened. When information reached us that the surrender had occurred though Captain Dickey our detail was disbanded & informed that it was not necessary for us to go back to Appomattox & therefore neither he nor myself were present at Appomattox & get were actually engaged in the service at the time of the surrender. I know the above of my own personal knowledge as being a member of Co A 9th Ga Artillery & was present when the event regarding above occurred.
Sworn to and Subscribed before me Jan 14 1911
W. F. Brown
Ordinary

JOHN R. WILKINSON
ORDINARY
AND
JUDGE COURT OF ORDINARY,
FULTON COUNTY

Atlanta, Ga. Jan 17th 1911

State of Georgia
Fulton County
Personally appeared before the undersigned J. M. Carly who after being duly sworn deposes & says by way of amendment to his application for a pension under the Act of 1910 that he stated in his original application that he was present with his Command at the time of the surrender of his Command himself present because he was in line of duty on detail in Charge of the wagon train at Farmville Va. having been detailed for this service by Major Lyden & Captain Brown his Quartermaster, he having been in the band of the period for about a month before the surrender & at the time of the surrender at Appomattox he did not learn of the surrender until 3 or 4 days after it occurred & word was sent to the signal in Charge of the wagon train by Captain Dickey to disband & go wherever we could take the best care of ourselves as could & none of the men went back from Farmville to Appomattox because the Captain said it was not necessary -
Sworn to and Subscribed before me Jan 17th 1911
J. M. Carly
Ordinary

There is no necessity for this as I am not a member of the
Theater neither he nor myself were present at Appomattox yet
was actually engaged in the service at the time of the surrender - I
knew the above of my own personal knowledge as he was a member of
Co. B of the 1st Artillery & was present when the event referred to above
occurred -
Given to and Subscribed
before me this 7th day of 1911
Harold M. Harrison
C. C. O.

W. L. Proctor
Clerk

There is no necessity for this as I am not a member of the
Theater neither he nor myself were present at Appomattox yet
was actually engaged in the service at the time of the surrender - I
knew the above of my own personal knowledge as he was a member of
Co. B of the 1st Artillery & was present when the event referred to above
occurred -
Given to and Subscribed
before me this 7th day of 1911
Harold M. Harrison
C. C. O.

107 of 100 made only

Reg. 100-010000-1-17-10.

High Court, State of New York, in and for the County of Sullivan, ss. I, the Clerk of said Court, do hereby certify that the within and foregoing is a true and correct copy of the original as the same appears in the files of said Court.

CV
Leicester
E-62 (8th county)
No. *1127*

Oct 1916 -

St. Louis

Widow's Pension

UNDER ACT 1910

County *Sullivan*

Name *Mrs. Eliza M. McCarty*

Widow of *Maurice McCarty*

Co. *B* Regt. *2nd Cavalry*
afterwards 8th Confederate
Cavalry - Tennessee, Mo.

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer

4/14/14 *111-1915*

Pension Office, / 15/7/15.

Must submit name to file up to prove marriage to soldier husband. This is an important fact and must be omitted.
J. W. Lindsay, Comm. of Pensions.

Widow's Pension
UNDER ACT 1910
Name: Eliza M. McCarley
County: Spalding
Residence: Atlanta, Ga.
Age: 84
Married: 1882
Husband's Name: John Edgar McCarley
Husband's Rank: Private
Husband's Regiment: 1st Georgia Infantry
Husband's Service: Confederate Army
Husband's Date of Death: Nov. 4, 1908
Cause of Death: Wound received in battle
J. W. LINDSEY,
Commissioner of Pensions

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

STATE OF GEORGIA,
Spalding County.

Personally before me comes Mrs. Eliza M. McCarley 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. Mrs. Eliza M. McCarley makes to the following questions to-wit:

1. What is your name, and where do you reside? Atlanta, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? Since 1882 to 1915
3. When, where and to whom were you married? Aug. 18, 1882, to John Edgar McCarley, Columbus, Miss.
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.) He enlisted in the 1st Georgia Infantry, Co. B, at Columbus, Miss., in 1862, and served in the Battle of Gettysburg, Pa., in 1863.
5. When and where did the Commands of your husband surrender or discharge from the army? He surrendered at Appomattox, Va., April 9, 1865.
6. Was your husband personally present at the time of the surrender or discharge of this Command? Yes.
7. If he was not present state clearly where he was? He was at Appomattox, Va.
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?
 - h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
9. When and where did your husband die? Nov. 4, 1908, Atlanta, Ga.
10. Were you residing together when he died? Yes.
11. If not, how long had you resided apart?
12. 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 and where.) None.
13. 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.
14. What property of any description of any value have you now?
Give list and cash value. None.
15. What are your annual earnings or income from any source and their value? None.
16. Have you or your husband heretofore been paid a pension by the State?
If so, when and for what cause were you or your husband placed on the Roll? None.

Sworn to and subscribed before me this the 30th day of October, 1915.
J. A. Lindsay Ordinary.
of Spalding County.

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA,

Wilkes County.

Personally before me comes John R. Patton 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? John R. Patton, Wilkes Co.
2. How long and since when have you known Mrs. Elizabeth McBarth applicant? Since 1908
3. How long and since when has she continuously resided in this State? (Give date.) Since 1908
4. When and to whom was she married? How do you know?
5. How long and since when did you know Mrs. Elizabeth McBarth her husband? From 1908 to 1915
6. When and where did Mrs. Elizabeth McBarth the husband of Applicant die? In Wilkes Co.
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? None
9. Were they divorced? Yes
10. When, where and in what Company and Regiment did Mrs. Elizabeth McBarth serve? In the 1st Georgia Infantry, 1908 to 1915
11. Were you a member of the same Company? Yes
12. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From 1908 to 1915
13. When and where did his Command surrender, and was discharged? At the end of 1915
14. Were you personally present when it was surrendered? Yes
15. Was the husband of applicant personally present at surrender? Yes
16. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? None
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

day of Nov 1915

John R. Patton Ordinary.

of Wilkes County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Wilkes County.

Personally before me comes Mrs. Elizabeth McBarth who on oath says that they are freeholders of said County and that they know Mrs. Elizabeth McBarth 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: None

Schedule (A) as follows: None

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 15th day of Nov 1915

John R. Patton Ordinary.

of Wilkes County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Wilkes County.

I, John R. Patton Ordinary of said County do certify that, I know Mrs. Elizabeth McBarth the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th Nov. 1908.

That I also know Mrs. Elizabeth McBarth the witness who swears to the service of husband, and Mrs. Elizabeth McBarth 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 None Returned for Tax is for 1908 \$ None for 1910 \$ None for 1912 \$ None for 1913 \$ None for 1914 \$ None for 1915 \$ None for 1916 \$ None for 1917 \$ None

Sworn under my hand and official seal of office this 15th day of Nov 1915

(SEAL.) John R. Patton Ordinary.

of Wilkes 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. Only widows who married prior to first January 1910, are entitled. 4. All affidavits must be made before the Ordinary. 5. Attach certified copies of marriage licenses if obtainable. If not, prove marriage, by some person, or by general reputation.