STATE OF GEORGIA,
Fulton County.
Personally appears (1/6 Rich)
County, State of Georgia, who, being duly sworn series
since theday of 18.54; that he isyears old an
by occupation a, that he enlisted in the military service of the Co
federate States (or of the State of) during the war between the
States, and served for the term ofin Company, of 60 th Regimer
of La Real in Company AC, of 60 th Regimen
follows:
Infin
1
that his property consists of the following items:
are property consists of the following items:
of the value of
of the value of Dollars, that by reason of his physica
Post y are is diable to support himself by his own
and pension but the one nerein applied for
Deponent desires to participate in the benefits of the Act approved December 15th
amendatory thereof, and makes application for the
is entitled for the year 1904. I have heretofore as a resident of Relicon. County been allowed a pension for the year 1
Sworn to and subscribed to the year 1
Sworn to and subscribed before me, this the
John Addel Kurson Ordinary.
STATE OF GEORGIA,
Part County.
I, John R. Williams Ordinary of said County
o certify that I am well as well as a county,
to certify that I am well acquainted with
he applicant in the foregoing affidavit, and am well satisfied that the statements made
y him in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County.
Given under my official signature and seal, this MAN 20 1904
day of
your Wilkings
Ordinate Preste note

Norn.—The blank spaces must be filled.

Norn.—Affidavit should not be attested before January 1st, 1804.

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	Fulton. County.	
County, State of Georgia, who, being duly sworn, says on each that he is a bowa fide citizen and resident of said County and State, and has resided in said State continuously ever since the		
since the day of 18; that he is years old and by occupation a 18; that he is years old and by occupation a 18 ; that he is years old and by occupation a 18 ; that he is years old and by occupation a 18 ; that he is years old and by occupation a federate States (or of the State of In Company of In Company of Ith Regiment of In Company of Ith Regiment in the sense of Ith		١.
by occupation a period and by occupation a period and states (or of the State of the Confederate States (or of the State of the Company of the war between the States, and served for the term of the company of the Regiment of that his physical condition is as follows: Dollars. I am now earning, by my labor. Dollars per month. That by reason of his obysical condition and poverty he is unable to support himself by his own exertion or abor, and that he receives no pension but the one herein applied for. 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 F1111011. Sworn to and subscribed before me, this the day of JAN 2 1905 1905. Ordinary. Ordinary. Ordinary of said County, 1905 and County, 2005 and County,	which the world of	ide citizen
by occupation a plant he enlisted in the military service of the Confederate States (or of the State of the State of the Company of the War between the States, and served for the term of the Company of the Regiment of the Value of the Value of the Company of the Regiment of the Value	A chart had	11 1
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that his property consists of the following items: 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 abor, 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 1905. I have heretofore as a resident of Fulton. County been allowed a pension for the year 1904. Sworn to and subscribed before me, this the day of JAN 2 1905, 1905. Ordinary. Ordinary. Ordinary of said County, Secretify that I am well acquainted with	of Real Replacement of the Company of 60 th I	Regiment
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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 Filton. Sworn to and subscribed before me, this the day of JAN 2 1905, 1905. Ordinary. Ordinary. Ordinary of said County, a certify that I am well acquainted with	physical condition and poverty he is much believe month. That by reason	of his
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 Filton. Sworn to and subscribed before me, this the day of JAN 2 1905, 1905. Ordinary. Ordinary. Ordinary of said County, a certify that I am well acquainted with	labor, and that he receives no pension to support himself by his own exer	tion or
Sworn to and subscribed before me, this the day of JAN 2 1902, 1905. County been allowed a pension for the year 1904. Sworn to and subscribed before me, this the day of JAN 2 1902, 1905. Ordinary. Ordinary. Ordinary of said County, secretify that I am well acquainted with	Pound of the state	
Sworn to and subscribed before me, this the JAN 2 1905, 1905. Ordinary. Ordinary. Ordinary of said County, County that I am well acquainted with	1894, and the Acts amendators the second of the Act approved December	er 15th,
Sworn to and subscribed before me, this the JAN 2 1905, 1905. Ordinary. Ordinary. Ordinary of said County, County that I am well acquainted with	is entitled for the man 1905.	hich he
Sworn to and subscribed before me, this the day of JAN 2 1905, 1905. Ordinary. Ordinary. Ordinary of said County, Certify that I am well acquainted with	the year 1500. I have heretofore as a resident of	
STATE OF GEORGIA. County, Cortify that I am well acquainted with	boardy been allowed a pension for the year 1904.	
STATE OF GEORGIA. RINTON. County, Cou	Sworn to and subscribed before me, this the	
FINEOR. County, I. Ordinary of said County, certify that I am well acquainted with	day of JAN 2 1905, 1905.	
FINEOR. County, I. Ordinary of said County, certify that I am well acquainted with	Of Philipped and A At a	13
County, I. Ordinary of said County, certify that I am well acquainted with		(/
County, Cou	STATE OF GEORGIA:)	
ordinary of said County,	Briton, County	
certify that I am well acquainted with	1 11/19/10/10/11	
the comment and well acquainted with the comment of	Orthogra of soid C	county,
The state of the s	west and west acquainted with	
experient in the foregoing affidavit and am well satisfied that the statements made	and any well satisfied that the statements	made
and its said amount are true, and I know he is the individual he comments	be, and that he resides in this County.	imself
	Given under my official signature 1 100 2 100	0.5
Given under my official signature and seal, this JAN 2 1905	day of	J5
75 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A	100 pt 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2 Swiedingons	▲ 100 Marie 1990 Mar	
Ordinary Eulton. County	Collins Williams	e de la

Nova.—The blank spaces must be filled. Nova.—Affidavit should not be attested before January 1st, 19

	A STATE OF THE PARTY OF THE PAR	10 may 10	The second second	100			
Tullow County	Penalon Communication		7				- American
No			· r		W. W.	ŗ.	010
INDIGENT PENSION,				Execut	add receipt		5
1902.	oga of Salatons	¥.		of it has	for the pe	-	G.F.
Name David D Rice County Futton	amended tolk			1			CTAC
County Fullow Co. B 18th you Regim's	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,			od, and re	COUN	}
Approved 1966 1802.				- ABB ()	quest that	g Ty.	~-
JOHN W. LINDSEY,		· ·			he remit same		
WARRANT HANDED TO					to		
Ordinary will write Name of Applicant, Company					1902	hereb	
Ordinary will write Name of Applicant, Company and Regiment on back as indicated above. Geo. W. Harrison, State Printer, Atlanta,		X'.			2	y authoriz	
10/13-1905/00						•	

OF LITTLE OF CHOPOLA	Adoguous in Wholicaut.
STATE OF GEORGIA,	STATE OF GEORGIA,
COUNTY	Full County,
	to avail blueste of the Pandy And State and County, desiring
I,bereby authorize	to avail himself of the Passion Act (Section 1954, 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 pame and where do you reside? (give State, County answerstone)
The state of the s	1. What is your name and where do you recide? (give State, County and costoffice)
eccive and receipt for the pansion allowed, and request that he remit same to	Land war war to Julion Co
at by	2. How long and since when have you been a resident of this State?
Witness my hand and seal, this day of 1902.	2/ 03/04/
	3. When and where were you born? Febry 201844 in Cowan bo 1
Executed in presence of	When and where and in what company and regiment and you enlist of herve? Company 3
	1890 1973
The state of the s	5. How long did you remain in such company and regiment? Two while on Oc
	of eggli 18lock and way more able alle
	instruction de mititary destroit
	6. When and where was our company and regiment surrendered and discharged?
	& rembered touch tier al der I would be
	& was at from on Farlow
A Section of the sect	7. Were you present with your company and regiment when it was surrendered? 200 8. If not present, state specifically and clearly where your when the property of what cause
in the state of th	and by whose authority? I want description of the whole whose authority?
. A. C. M. J. C.	and by whose authority? I would an act in ac
	9. How much can you earn (gross) per annum by your own exertions or labor? Moshing, not abo
	10. What has been your occupation since 1869 to and the schooling of Original
	10. What has been your occupation since 1893 to the following grounds do you base your application to pension, vis. first, "age and poverty,"
	second, "infirmity and poverty," or third, "blindless and poverty to the second, 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 histor, and the second the second, give a full and complete histor, and the second the second to the second the second to t
The state of the s	support? If upon the second, give a full and complete histor and have been in such condition that you could not earn your support? If upon the second, give a full and complete histor and have been the support of the second sec
	state whether you are totally blind and when and where you lost your sight? Tarkial paral
OF THE PROPERTY OF THE PROPERT	
3 3 1 3 1	
33-65 3 2 2	d —
	0 18. What property, real or personal, or income, do you possess, and its gross value? Nothing Ex
	14. What property, real or personal, dld you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900 and 1901.
FREE TEN A SOUTH THE PROPERTY OF THE PERSON	and what disposition, if any, by sale or gift, have you made of same? Hathan of the cold
	& House buch goods I gome money which &
A TOTAL OF THE PROPERTY OF THE	16. In what County did you reside during those years and what property did you then return for taxation?
	Dellow County the your reside during those years and what property did you then return for taxation?
The second of th	16. How were you supported during the years 1899, 1900 and 1901! by my own the
All the second of the second o	or lober
1256188	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? A second 1808, 1899 and 1901? What was your employment during 1898, 1899 and 1901? What pay did fou receive in each year?
	19. Have you a family? It so, who composes such family? Give their means of support? Have they a
	banestoad? afel. Two deaphirs & Son Fore Grand dang le
	No Adopacte my son mokes his own augh
	The dong has bleed home for me
SIZV PO TENENT PER IVE INTERIOR	20. Are you receiving any pension? It so, what amount and for what disability?
	21. Have you green made an application for application for applications fo
	21. Have you ever made an application for pension before?
	22. How many applications have you ever made and under what class?
5 - 1 - 3 3 4 - 1 E 12 12 12 12 12 12 12	Sworn to and subscribed before me this the
	13 - Vallet & Mee
	Applicant,
	of Fullow County.
	County
	A CONTRACT OF THE PROPERTY OF

STATE OF GEOR	GIA,	7 4	(II)
Julton	COUNTY .		
NEGOTIAN AND AND AND AND AND AND AND AND AND A	1	Einman M	0 -
Personally came before me	Alle A Bue	enman in	andand
		both known to t	ne as reputable physicians
of said County, who becauteverally a			
such persons camination say that his	precise physical condition	for pension under Sect	ion 1254, Code, and after
Chapie discare	an Ni America	is as follows:	
Chorie disease	- J canego	ania una	emen
poisoning resul	ung.		
and that we have no interest in said per	ision being allowed.	ROHinna	n MD. X
Sworn to and subscribed before		Kutterg	Derracton!
day of Octob	1902. \$	V	,
John Wilkinson	Ordinar	y .	
ORDIN	ARY'S CER	TIFICATE	
		ITHIOAIE	
STATE OF GEOR	GIA,		,
Trutton	COUNTY.	er V	
Zohu R/121	All the state of t	a mar physical is	_
1. John Wee	N. W.	Ordinary in and for said	County hereby certify
that the applicant Caved	N Vicer	resides	in this County and had
been a bona fide resident of this State	ince the	day of	710
and that the witnesses, viz : 5	Judwal	C 7/1/an	LA LA CONTRACTOR
			165
are of trustworthy character, and that t	seir statements are entitled	to full faith and credit.	hod de ha
I further certify that before answ hereon prescribed, and that the <u>full text</u>	ering the foregoing questi	ons the applicant address	ch without took the such
alter 1		现在,他们是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	(1)
I further certify that the tax dig	THE PROPERTY OF THE	Con	ny show high applies nt
eturned for taxation in his name in 188	9	3	Doffare of
property, and in 1900.		Dollars	property.
In my opinion the foregoing clain	ie .	made in good	faith.
Witness my hand and seal of of	ice, this	day of Oet	1902.
10	John I We	Kuron	Ordinary,
. 6	of of	Futto	County.
	Worn.	4	
1. Refere and american are answer	and the audinous shall am		

Tullon COUNTY.
COUNTY.)
Of and State and County, having been presented
as a witness in support of the application of
under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside? Fed Ireachiell Atlanta
Ele Fullon Count
2. Are you acquainted with David & Rice the standard of the st
long have you know him? The all the things have applicant; if so, how
3. Where does he reside and how long and directly
lasides in allanta des offerton there in a will had
4. When, where and in what company and regiment did he enlist, and how do you know?
march 18 7862 levryers Sa Muton les. Company B. 18. Reg & vols
5. Were you a member of the same company and regiment? The served as Coult a good deal
6. How long did be perform regular military duty? about Two + a half years
7. When and where was his command surrendered? April 9 1 1865 at appointant 6, N
Virginia
8. Were you present when it surrendered? Was Not
9. Was applicant present? Dord Know
10. If he was not present, where was he? Dout Kurt
When did he leave his command? about 19 1/864 For what cause? On account of ferm
By what authority he left? On a gurrout go higher offices How do you know all of this?
was reting Capture of the Company, and Knows that her
Rese was bounded and granted a furlow to go home about Am 1864
11. What property, effects or income has the applicant? (Give your means of knowledge.)
Make Moran him 15 m 20 aura Parinel
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902,
and what disposition, if any, did he make of same?
13. Has be conveyed away any of his property in the last flow years.
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 applicantly applicable and applicable applicable and applicable applicab
14. What is the applicant's occupation and physical condition?
A STAR CONFIDENCE AND TRANSPORTER AND TRANSPOR
15. Is the applicant unable to support himself by labor of any other l
adjust this end of any sort; it so, why?
Me is no parte la se paisical labor
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 added.
In fact about one store his the
18. Give a full and complete statement of the applicant's physical condition that entities him to a pension under
Section 1254, Code?
Me is not strake to the little
19. Who composes family? What property have they? Calidren's age and their carning capacity?
one sideal Dangther and shill
Caughles de 1) on chie Gue
0. What interest have you in the recovery of a pension by this applicant?
Sworn to and subscribed before me, this the
day of Wilness
Mount Manner on + d /1 Hay

STATE OF GEORGIA,	
Fillon County.	a
Personally came before me R.S. Hun	non me and
Me Dan altron me	both known to me as reputable physicians
or said County, who, being severally sworn, say on oath that they have e	namined carefully Savid
such personal examination say that his precise physical condition is as fol	llows:
Chronic Bright duenne of Ring	un with Sugar to
uxemic attacks unfiting and	desabling Rily Por
Garning a living	
and that we have no interest in said pension being allowed.	24/
Sworn to and subscribed before me, this, the	Minman MID
John R hersen Ordinary.	nouseven ma
ORDINARY'S CERTIFI	CATE
STATE OF GEORGIA,	CATE.
Tulla	
COUNTY.)	_
/dinary	n and for said County, hereby certify
that the applicant	resides in said County, and has
been a bone fide resident of this State since theday of	189
and that the witnesses, vin .: 40 Dicabuse	213. Bank.
are of trustworthy character, and that their statements are entitled to full fa	th and and the
I further certify that before answering the foregoing questions the ap-	pplicant and each witness took the cath
herson prescribed, and that the full text of the affidavits was read to the appli	cant and witness before same was signed.
I further curtify that the tax digest of	
returned for taxation in his name in 1899	Dollars of
and the state of t	Dollars of property; in 1901
- The state of the	Dollars of property; in 1902
In my opinion the foregoing claim is	nade in good faith.
Witness my hand and seal of office, this	190
John We	ettiniordinary,
of 7	ullan County

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, to help you God."

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

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

STATE OF GEORGIA, County.		
Ĭ,	he	reby authorize
of		
to receive and receipt for the pension allowed, as	nd request that he r	emit same to
by		
WITNESS my hand and seal, this		
Executed in the presence of		[L. s.]

COOR SECTION 1334. (FOR THOSE ALREADY EMBOLLED.) NO. 232 INDICENT SOLDIER'S PENSION 1906. County Fulton. Co. Regiment M. M. WARRANT ISSUED WARRANT ISSUED WARRANT HANDED TO THE PRINCE OF INCOME.

POWER OF ATTORNEY.

STATE OF GEORGIA, COUNTY.	•
In the second second	hereby authorize
-01 6000	
to receive and receipt for the pention allowed, and receipt	
WITNESS my hand and seal, thisday	of1907.
Military of the Manager St. Colored	

Firston.

Copnety.

Regiment /

WARRANT ISSUED

JOHN W. LINDSEY, Commissioner of

WARRANT HANDED TO

Rice Baniel B.

(FOR THOSE ALREADY ENROLL

SOLDIER'S PENSION 1800 Z.

of date

- 1711 C. CTC JOURNAL PRINCE

APPLICANTS WERE'S FORE ALLOWED PERSONS

	-		Control of the State of the Sta
State of	Georgia,)	
Fulto	County	ł	3
		9/11	775. 41
Personally ap		Duce	of Fulton.
and resident of said	County and Chair	worn, says on oath	that he is a bona fide citize
since the	_day of	has resided in s	aid State continuously eve
/		he entired in the	e is byears old an
federate States (or of	the State of	AA A	nintary service of the Con luring the war between th
States, and served for	the term of Sulr	L in Company	of th Regimen
s Sar A	, /	thet	his physical condition is a
ollows:	tirmites		posierty,
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		/,	The second second second second second second
nat his property cons	sists of the following it	ems:	
	William Control of the Control of th		
CONTROL COMPANY OF CHIEF CASE AND CONTROL CONT		/ /	
f the value of		D	ollars. I am now earning
my labor,		_Dollars per mon	th That by mason - 61.
nysical condition and	poverty he is unable	to support himse	elf by his own exertion or
oor, and that he rece	eives no pension but th	e one herein applie	d for.
Deponent desire	s to participate in the	benefits of the Act	ennround Descrit 12.1
e, and the Acts ame	endatory thereof, and n	akes application for	the pension to mhigh to
entitled for the year	r 1906. I have heretof	ore, as a resident o	Fulton.
ounty, been allowed a	pension for the year 1	1905,	his
	scribed before me, this	the O	· XXX
day of	JAN 1 1906 190	6. Janua	d D. Wi
in M	Durling	Ordinary.	Mark
(
State of Go	9or gia ,	1	
F117+71	County.	ſ	
I,	all Wilking	ast.	0-11
certify that I am w	ell acquainted with	David.	Ordinary of said County,
		m well estimated	hat the statements made
him in his said affide	avit are true, and I kno	w he is the indicate	ual he represents himself
e, and that he reside	s in this County.	, and an entering	um de represents himself
	nder my official signatu	are and seal this	JAN 1 1906
day of		1906.	
		In Pluie	Vinson -
ix }		70.177	THE WATER OF THE PARTY OF THE P
		distance	

State	
State of Georgia,	
Fulton. County.	
Personally appears David & Rice of	
County, State of Georgia, who, being duly sworn, says on one that he is a bona fide cities	B
and resident of said County and State, and has resided in said State continuously en	ze
since theday of 18\forall 5 that he is 4\ldots	ve
, that he is to vears	ole
and by occupation a, that he enlisted in the military service of the Co federate States (or of the State of) during the war between the state of	n
States, and served for the term of Marin Company, of the Regime	h
of the Regime	n
follows: that his physical condition is	25
The property	
that his property consists of the following items:	
to to the following items:	
of the value of Dollars I om now	
by my labor,Dollars per month. That by reason of h	g
physical condition and poverty he is unable to support himself by his own exertion of	is
abor, and that he receives no pension but the one herein applied for.	ır
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 h	1,
s entitled for the year 1907. I have heretofore, as a resident of Fulton.	e
County, been allowed a pension for the year 1906.	100
Syromy to and all 11 11 f	
day of 1907.	
John Of William Ordinary.	
State of Georgia,	
Fulton. County	
The OD Allinson	
Ordinary of said County	,
o certify that I am well acquainted with Sauch I fiel	
e applicant in the foregoing affidavit, and am well satisfied that the statements made	
him in his said affidavit are true, and I know he is the individual he represents himself	
be, and that he resides in this County.	
Given under my official signature and seal this	
day of JAN 2- 1907.	
And I Williamson.	
Ordinary County	

Affin your seal here

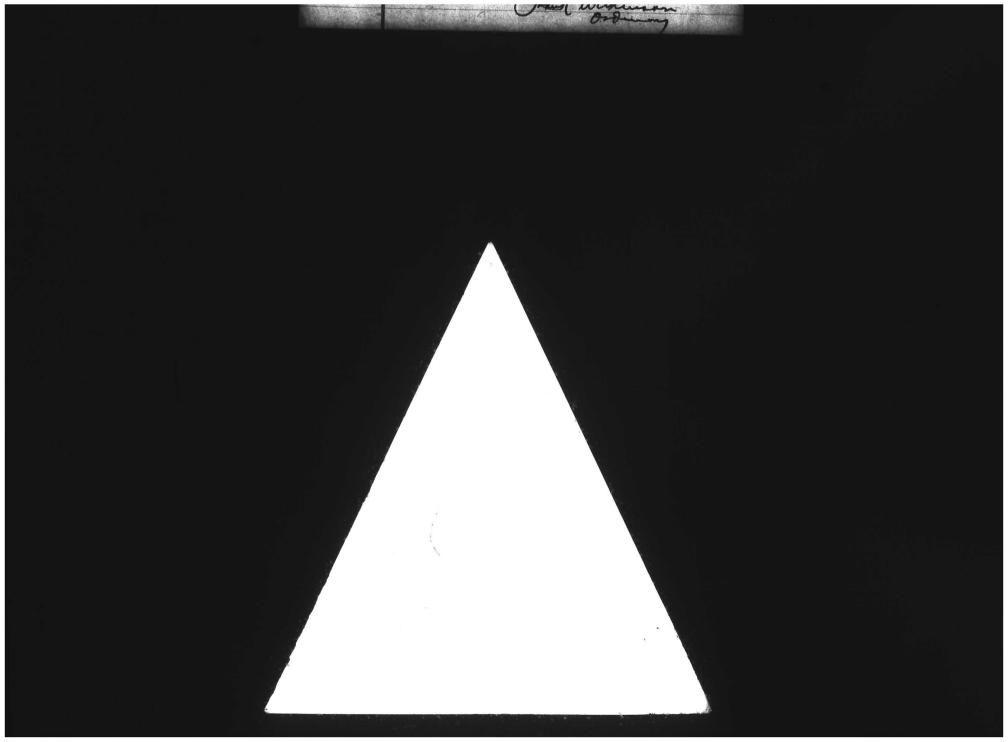
Nova.—The blank spaces must be filled.

Nova.—Affidavit should not be attested before January 1st, 1907.

Ordinary_

_County.

Leongia Fullon County In person Carrie before the under. Signed Ordinary in and for said Come B M Deward Who being duly sworn sails on out that he is a resident of said state and lounty 160 years old. that he has personally Known david & Rice at least forty five years that He Knows of his own Knowledge that about October 1864. The said David & Rice Come home from the war budly wounded in his foot - and then said he had Come home on a furlough. he also Knows that said him did not recover from his said browned during remainder of the war and throws he wasyable to ration to the service after he come home on said Furlough until the war cloud-The said David D. Rice lived near him and he knows all there facts - # and that he have no interest in the recovery Sworn to and subscribed BOLDINNAD before me this Sels 18 47900 Sand Wilkinson Ordinary(acity of the Dermand

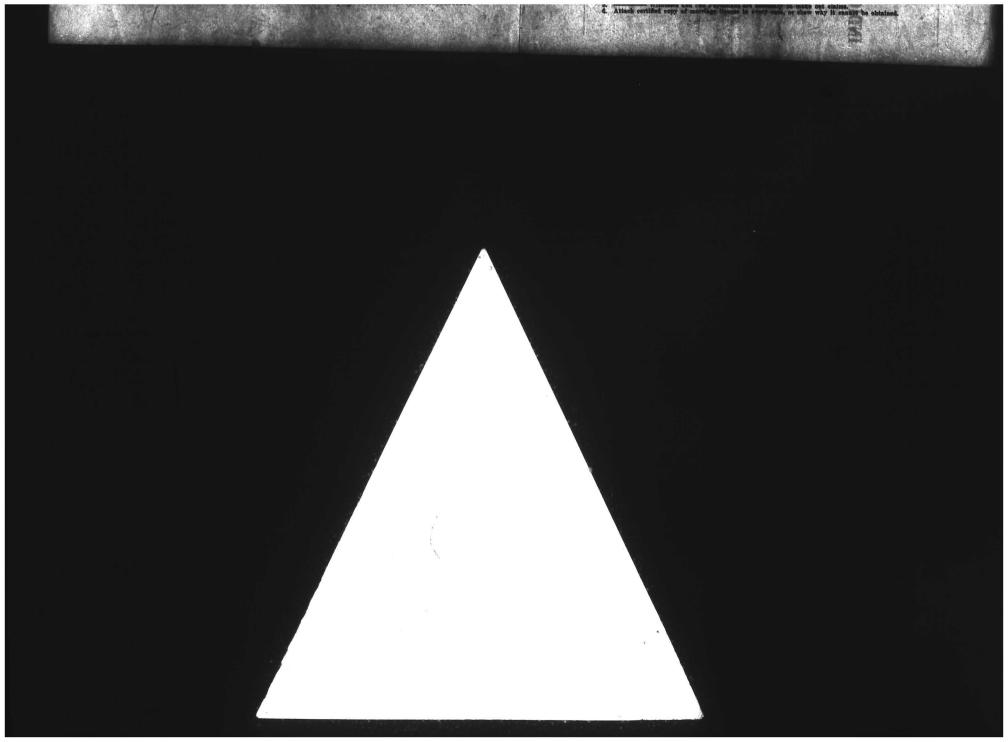


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WIDOWS INDIGENT PENSION.	willing Committee of the Mark Poul Pour willing service most military service most military as and		he remit the same to mees my band this. Executed in presen	E OF GEORGIA
Elya GeneRice	Court Har		ce of County.	County.
Approved			to receive and receip	
WARRANT HANGED TO	Id		t for the pension allowed k or registered mail.	

	County.	The Late of the	rasura 124		14
I,	hereby authorize	(September 1997)			
of					
and that he remit the same to me a	it	by his check or re	gistered mail.		
Witness my hand this	day of	190			9
Executed in presence	of				!
	Ordinary,	•	L. S.	140	
	County.		Š.		
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[SEAL]		8		1	
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Min Ret a Clary Office (AIDRO TO TO	
Of dead State and County Adulation	or tex
Assembly, passed December 19, 1900, hereby submits her proofs, and after being duly sworn 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.)	eral
Assembly, passed December 19, 1900, hereby submits her proofs, and after being duly sworn	rue
What is work ended and when describes and answers as follows:	4
nin Jame Amer Ago you reside? (Give State, County and Postoffice.)	
a companied to the state of the	
2. How long and since when have you been a resident of this State?	574
3. When and where were you born? Acro Con On the	
Land Real Property 1 De 3 De	
4. When and where was your husband horn, store his full name and when	777
4. When and where was your husband born—state his full name, and when were you and married? (Attach copy marriage license in every case.)	he
married! (Attach copy marriage license in every case.) Demplell to lin Deal	2683
b. When and where and in what Company and Regiment did your husband culist or serve d	
ing the war between the States? Others of new Citaria Hand Frank Sa Se	22 7. 3
Namen but was betailed in James 1863 for Mater denvis out	Va.
6. How long did your husband serve in said Company and Regiment?	
Gill close of was lared 244	
97. When and where did your fusband's Company and Regiment surrender and was discharged	
Discharged in attanta, Games of the 1865	r
8. Was your husband present at the time and place when his Company and Regiment surre	
dered? and Regiment surre	en-
9. If set with his command at surrender stees clearly and annals.	
by and specifically where he was, when he le	eft
command, for what cause, and by what authority?	
The was will his commande	
and the state of t	
10. When and where did your husband die? - an aslanta La	
1 46 10-4 4 0 0 - 110	,
11. Which of the following grounds do you been your application for partial and	
The second of th	ge
and Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty?	
age my Covery	
18. If upon the first ground, state how long you have been in such a condition that you cannearn your support. If upon the second, give a full and complete history of the infirmity and its external function that third, state whether, you are totally blind, and when and where you lost your sight?	ıt.
13. What has been your sound in the state of	
13. What has been your occupation since your husband's death?	
A	
	-
14. How much can you earn gross, by your own exertion or labor?	-
15. What property, real or personal, or income do you have or possess, and its gross value?	,
Orone	
16. What property, real or personal, did you possess at death of husband or he left you, and of the	
	-
me house the mentures solden process divided between me	
17. In what counties did you reside in 1905, 1906, 1907, and 1908, and what property alld your	
en for tavation? Classification TOA	-
18. How have you been supported since darth of husband and annually	=
and save many you ween supported since death of husband and saccalatin for the	7
1908, 1906, 190	-
d 1908? (By Janahter	e
1908? 1908? 1909 How much did your support, cost for each of those years, and how much did you contribute	_
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d 1908? 19. How much did your support cost for each of those years, and how much did you contribute your own labor or income? 20. What was your employment during 1905, 1906, 1907 and 1908—how much did you received.	е
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19. How much did your support cost for each of those years, and how much did you contribute your own labor or income?	e -
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19. How much did your support cost for each of those years, and how much did you contribute y your own labor or income? 20. What was your employment during 1908, 1906, 1907 and 1908—how much did you receive reach year? 21. Have you a family? If so, who composes such family? Give their means of support? Have you and lands or other property? How you want lands or other property? How you want lands or other property? How you made for a pension before? 23. How many applications have you made for a pension, and under what class? Sworn to and subscribed before me, this the lands of the	e
19. How much did your support cost for each of those years, and how much did you contribute your own labor or income? 20. What was your employment during 1905, 1906, 1907 and 1908—how much did you receive each year? 21. Have you a family? If so, who composes such family? Give their means of support? Have you any lands or other property? Have you have you were made application for pension before? 23. How many applications have you made for a pension, and under what class? Sworn to and subscribed before me, this the	

A STATE OF THE STA	The state of the s
STATE OF GEORGIA,	
Fully (1986)	97. How was she supported for 1905, 1906, 1907 and 1908 1 200 / 905 h have found annual of
County, County a date of the first of the said black and the said blac	18. How much did applicant contribute to her support for last two years? 2016 hours.
Wall Davie o John Charles and property state of sold and the sold of the sold	30. Give a full and complete statement of applicant's physical condition?
been present as a witness in support of the application of Mrs. Constant State and County, having	her health is generally bad and she is so leed
for a Pension under the Act of 1900, and after being duly aware true answers to make to	The state of the s
the following questions, deposes and answers as follows:	the is unablette do asky thing to earn money
	30. What interest have you in the recovery of this pension by the applicant?
my war and the state of the sta	Sugar to and subscilled before us at 1
, 8. Are you acquainted with the applicant, Mrs. Comments of the second	Sworn to and subscribed before me this the swarm of this
If so, how long have you known her?	day of June 1009 Call & Dance
3. Where does she reside, and how long since when has she been a resident of this State?	Col & Carles College (1) [Car
	2 1015 The lettownth
4. When and where was she born? Newton Co.	Witnesses.
5. Were you ever acquainted with her husband? 2500 Acres 1861	AFFIDAVITS OF PHYSICIANS.
6. Where did she reside in 1861? Atlanta Ba	
7. When and to whom was he married? about 1860 to Milliams Rice	STATE OF GEORGIA,
8. When and where was he born? 1837 Campbell Co, Gal.	County.
9. How long have you known him? Since 1860	Regreconally before me comes W. Jan Bull and
10. When and where did Alillan Reteenlist in the war between	THE TOTAL OF THE
10. When and where didenlist in the war between	physicians of said County, who, being severally sworn, say on oath that they have examined carefully
the States, and in what Company and Regiment did he enlist, and how do you know this?	Mrs. Place Pull pull applicant for a pension under Act of 1900, and after
in allanta ta Jos H Thymac Juras with him	such personal examination say that her physical condition is this
11. Were you a member of the same Company and Regiment?	Grand Centry - and Physically weakly
	Lang Ren Living
12. How long did he perform regular military duty? from 1861 to Closurof	
war on Western & attantes RR line.	
13. When and where was his Company and Regiment surrendered and discharged from service?	and we have no interest in said pension if allowed.
May 20-1865 in altert 82)	Sworn to and subscribed before me this
14. Were you with the Command when it surrendered?	
15. Was Milliam Rice the husband, of applicant present?	day of the 190 ms
gea -	Ordinary, 200
16. If not present, where was he?	Julia County 10 Moura much Ms
17. When and where did he leave his Command?	
For what cause?	ORDINARY'S CERTIFICATE.
By whose authority he left? May Gent Wilson	STATE OF GEORGIA.
How do you know all this? (State fully and clearly.)	
my self and discharged the same day	County.
	I, June 1. Ordinary, in and for said County, hereby certify
18. When and where did die?	that the applicant, Mrs. Elija Jame Riceresides in said County,
In 1960. Cor Rhodes ravis St. assaule In	and has been a bona fide resident of this State since/theday of
19. Where did he realds at his death and how long had he been a resident of Coorgia at his death?	Maria Call. St.
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?	are of trustworthy character, and that their state
20. Do you of your own knowledge know that applicant is the lawful widow of	ments are entitled to full faith and credit. I do further certify that the fore answering the foregoing questions, the applicant and said witnesses took the eath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was gand and subscribed. I further certify that the tax diget of the affidavits was read to the applicant and witnesses before the same was gand and subscribed. I further certify that the tax diget of the affidavits was read to the applicant and witnesses the certify that the tax diget of the affidavits was read to the applicant and witnesses the certification of the certification
Milkan Rice - 2 de	took the oath herein prescribed, and the full text of the affidavita was read to the applicant and with
11. Has she remained unmarried since her holdier husband's death, and to now the vidous	nesses before the same was algued and subscribed. I further certify that the tax diguet of the control of the
	1 further certify that the tax digest of
22. What property, effects or income has the applicant, if any, and how do you know this of your	returned for taxation in her own name in 1905dollars worth of property,
own knowjedge?	and in 1906dollars worth of property,
with her since 1861	in 1907dollars worth of property,
23. What property, effects or income did applicant possess in 1906, 1906, 1907 and 1908, and what disposition did she make of it?	and in 1908 dollars worth of property.
furces of development between the transfer of the second	Witness my hand and official seal tals. Also of the seal tals.
84. Has applicant conveyed any property in last two years or given any away, if so, what was it,	[SEAL.] Ordinary,
and to whom?	County
	NOTES-1. Before any questions are knewered, the Ordinary shall swear applicant and the witnesses in the following words: "You do colonary swear that you will brue answers make to each of the compliant asked of the
25. What is applicant's physical condition and her chances and ability to cars a support?	and the sydener you shall give will be the whole truth; so help you God.
A Company of the Comp	3. All affidevits must be made before Ordinary.
	Only widow. Who were his wives of the dead humands while they were soldies; need apply—and are now widows. Those married since the pulse I aren, less, not entitled.
	4. Attach certified copy of marriage themse in every case, or show why is county be obtained.



Widow's Pension UNDER ACT 1910 county Fueton Name Mary P Rice

ror Applicant.

	7
STATE OF	GEORGIA.
DIAIL OF	GLONGIA,
Fullo	
and and the same of the same o	County

Fullon County
Personally before me comes
Of
lowing questions to-wit:
1. What is your name, and where do you reside? Im. Mount I. Kice
2. How long and since when have you been a continuing resident of the State of Georgia?
Of Many to dinger in flow 1861 and fired freel was some
3. When, where and to whom were you married?
Macon Ha in the year 1868
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.)
see The Hoyal Rifles 2ª Ga / Jablion C. A. A.
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 Com-
mand?
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? 100
i. If so, when and where captured and where held as a prisoner, and when and for what cause
1000001
j. When and where did your husband die? Be Macon Su in 1899.
k. Were you residing together when he died?
1. If not, how long had you resided apart?
9. What property of any description did you own, hold or control for your year and its
value, Nov. 4, 1908? (State same by items and where situated).
Ditto austyon the assessed value was preaco
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was re-
ceived for it and what did you do with the proceeds thereof? (Give items and cash value.)
ATULA CAMULIN / BED WILLES Land / A
und for the huppert und a ducation of the my with uniform
except the lum of 1500 (FIFTEN HUNDRED SPILLING)
11. What property of any description of any value have you now?
Give list and cash value As Plated on item 10
12. What are your annual earnings or income from any source and their value?
La income except a little retent
13. Have you or your husband heretofore been paid a pension by the State? Ao
If so, when and for what cause were you or your husband placed on the Roll?
Sworn to and subscribed before me this the Mary Mary A
day of lets her 10/7
the second
Lawred Masson & Cordinary.
of Oxillary's

Percentily before me comes Medicana behaling fuelds who after being duly aworn true answers to make, to the following questions, answers as follows: 1. What is your amen and where it was surrendered? 2. How long and since when has the continuously resided in this State? (Give date). 4. When and to whom was aby margied? 5. How long and since when did you took. 6. When and to whom was aby margied? 7. How do go toog? It discusses. 6. When and where did. 6. When and where did. 6. When and where did. 7. Were the applicant and her humband living together as humband and wife at the date of his death? 8. If not, how long did they live apart before his death? Were they divorced? 1. 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. Was and where did his Command unrender, and was discharged? 13. Were you a member of the same Company? 14. Was the humband of applicant personally present at surrendered? 15. Were you personally present when it was surrendered? 16. When and where did his Command? 17. Was the humband of applicant personally present at surrendered? 18. Was the humband of applicant personally present at surrendered? 19. When, where and for what cause did he leave his Command? 10. Was the humband of applicant personally present at surrendered? 11. Was the humband of applicant personally present at surrendered? 12. When, where and for what cause did he leave his Command? 13. Were you personally present when it was surrendered? 14. When the fort did he make to return to his Command and how do you know this? dlyour own knowledge or how? 15. For what cause, if you know of your own knowledge, was he prevented from returning to bis Command? 16. What effort did he make to return to his Command and how do you know this? dlyour own knowledge or how? 17. Were the applicant to his Command and how do you know this? 18. When the fort did he make to return to his Command and how do you know	Sounty.	
1. What is your ame and where if you reside? Welding questions, answers as follows: 1. What is your ame and where if you reside? Welding the proposed of the continuously resided in this State? (Give date)	Personally before me comes Williams Beding fresher who after	
1. What is your ame and where one you reside? Medican Applicant? 3. How long and since when has he continuously resided in this State? (Give data) 4. When and to whom was shy magried? 5. How long and since when did you know here 6. When and to whom was shy magried? 6. When and where did 7. Were the applicant and her hunband living together as hunband and wife at the date of his death? 8. If not, how long did they live apart before his death? Were they divorced? 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? 14. Was the hunband of applicant personally present at surrender? 14. Was the hunband of applicant personally present at surrender? 15. Was the hunband of applicant personally present at surrender? 16. When and how came you there? 17. When hunband of applicant personally present at surrender? 18. Was the hunband of applicant personally present at surrender? 19. My hose authority did he leave Command? 10. Were you know of your own knowledge, was he prevented from returning to his Command? 10. Were you know of your own knowledge, was he prevented from returning to his Command? 11. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? 11. Was the fort did he make to return to his Command and how do you know this? Of your own knowledge or how? 11. Was and subscribed before me this the Command and how do you know this? Of your own knowledge or how?	being duly sworn true answers to make, to the following questions, answers as follows:	
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may 1 oth fly a man of huskyorith chante	o culy that my Beding for all is a	
	may 1 ott 1919 man of husbyorety chanter	

	33-	V347 -	HAR A CAM W	
	A Same		that they know My M.F. R.	who on oath says that the
	4 hos s	aid County and know what prop	erty she owned on 4th Nov. 1908, and	its cash value to be as set ou
	K by	Schedule (A) as follows		
-	B. 2	Personal prope	rty	· hour
1	· · · · · · · · · · · · · · · · · · ·	Notes and acco	unts due	\$ bores
,	135	Total		\$
`	820	We know the property sold on	Schedule (B).	
	LWS	Personal proper	given away since Nov. 4th, 1908, its c	ash value to be as follows:
	3 1313	Money, Notes	and Accounts	\$
(3)	120		Sahadula (C)	
3 6	2 1/2	We also know what property a	the has now in her possession, use and	d control to-wit:
10	3/3	Acres of land	worth	s 4 nue
()	M. 7	Horses and Mul	es	s Inne
th "	1	Cows and Hogs.		• 2
de,	· }	Other Property.		· Since
1	1 1	Income and Ear	ninge But 15 5 5 Duonth	ly) = 10.75
N.	12	Total Value	of all property and effects	y •
100	4 .	Sworn and subscribed before		\$10.73
		30 day of allege	12 14116	ow an
		les	1947 SAB. OF C	uch
				*
	-	01	Billo County.	
		ORDIN	ARY'S CERTIFICATE.	
	STA	TE OF GEORGIA,)	
		Cou		
	that I	know.	Ordinary	of said County do certify
	is the	person she represents herself to	be and she is a bona fide continuing	oplicant for pension. She
	County	and was on the 4th Nov., 1908		g resident citizen of said
		That I also know		.1
	to the	service of husband, and	residents of all Country	the witness who swears
		the foregoing affidavits and the to full faith and credit.	at they all are truthful, trustworthy,	and their statements are
			•	4523
	1008 8	for 1010 a		Returned for Tax is for
	for 1914	\$ for 1015 e	or 1911 \$for 1912 \$ for 1916 \$for 1917 \$	for 1913 \$
	5	worn under my hand and official	seal of office this	
		19	soul of office this.	day of
		SEAL.)	7.0	
	,	,	***************************************	•
		BEAL.)		County.
	WOTES 1	Before any questions are answered to You do solemnly swear that you w	the Ordinary shall swear applicant and the w ill true answers make to each of the questions so help you God."? So help you God."? If blank spaces are insufficient. first January 1870, are entitled. s Ordinary. Idense if obtainable. If not, prove marriage,	itness in the following words:
	1	you shall give will be the truth. Additional affidavita may be attache	So help you God.?" Id if blank spaces are insufficient.	saked you and the evidence
	4	All affidavits must be made before th	first January 1870, are entitled.	
		eral reputation,	icense if obtainable. If not, prove marriage,	by some person, or by gen-

GEORGIA, FULTON COUNTY.

Before me, a Notary Public in and for said county, in person came J. D. Goforth, who on oath says that he has seen the attached affidavit of Mrs. M. P. Rice, attached to and made a part hereof, and that he knows that the statements therein made are true.

Sworn to and subscribed before me this day of _______

Joseph Sublic, Fulton County, Ga.

Joyoforth

Sport of affe Sport me at 3+1915 GRORGEN, PULTON COUNTY.

Defore me, a Motary Public in and for said county, in person came Mrs. M. P. Rice, who on oath says of her estate, property or money, in an effort to assist her children, she gave to her con. A. S. Rice, the sum of Twelve Hundred (\$1,200.00) Dellars, and to her son, R. C. Rice, the sum of Two Hundred (\$200.00) Dellars, and to her daughter, Mrs. Q. H. Waller, the sum of Fifty (\$50.00) Dellars; and, further,

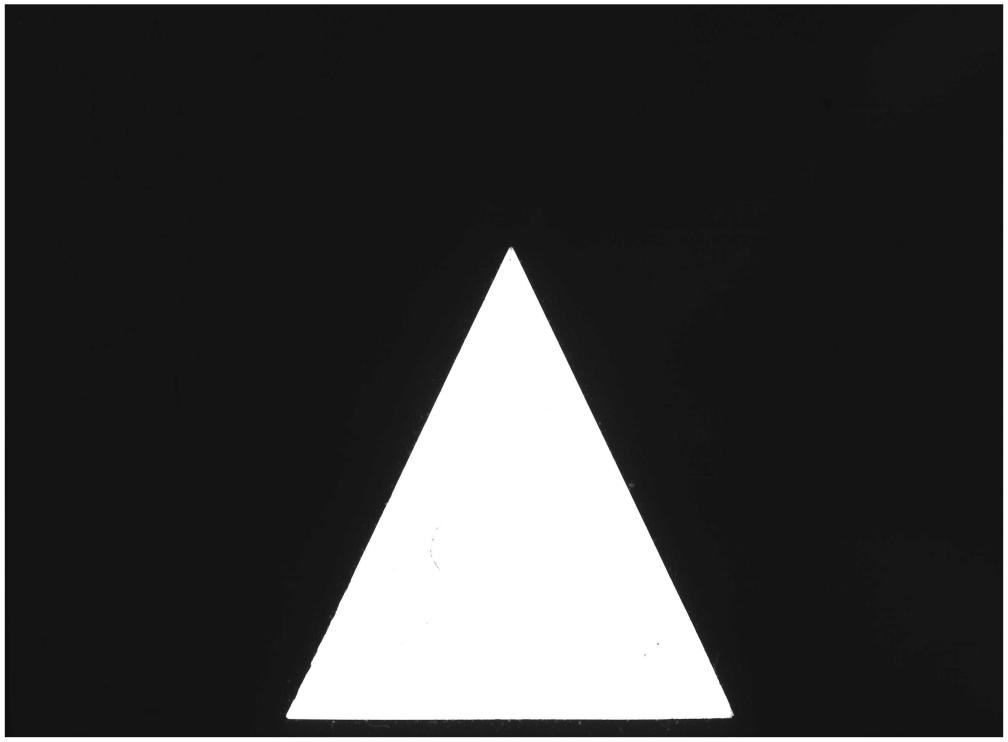
That these sums were given without security therefor and there is not the remotest probability or prospect of her children, as hereinbefore mentioned, ever being able to repay this money, and that by reason thereof she has been deprived of these several sums of money and has been rendered by the foregoing without sufficient income to sustain her.

My M. P. Line.

Sworn to and subscribed before me

Chamory Ga.

E.A.



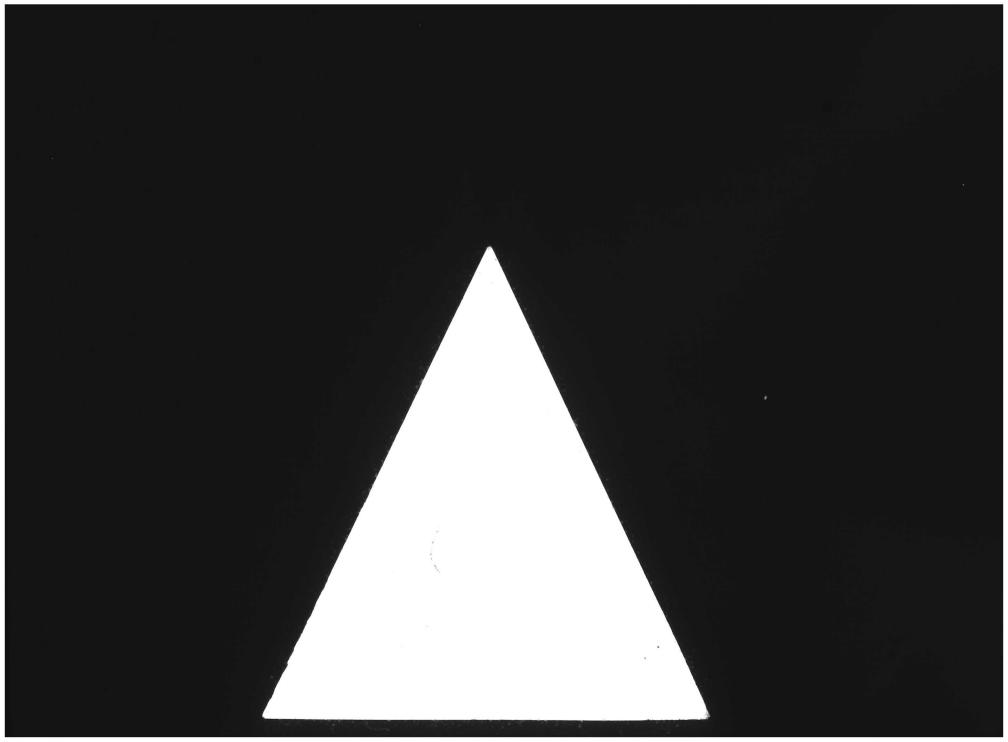
×	, M.	A Sul mospine (146)
 	know know and cr	Approved 1931
iven u	L. The Mrs. L. The	WIDOW'S APPLICATION To Be Put on Roll in Her Own Right When
nder in OF OR	GEORGIA GEORGIA GEL ts herself (ts herself (ts herself of the herself of t	Husband Was on the Pension Roll of Georgia.
Given under my hand and (SEAL OF ORDINARY)	ORDII TATE OF GEORGIA, 1. Canh Odd 1. Can	C 17
and o	OR op, and in also in the foregoing truthful	Name Maralling & Etherson Rice
E.	COUNTY CO	Namoderallingil Ettarpan River
eal of	NARY'S OUNTY Ling is con Ciac di Vere duly	Regiment 77th Oracles Constitution
office ti	the artinuo	Date of Husband's Death 4/2/ 19/
This was	2 4 5	Approved P. Cle TroGuren
213	IPICAT	Person Commission
	of said of said of said	of
A CONTRACTOR OF THE PROPERTY O	County, n; that n; that of a dent of	
9		
, 1982 rdinary,	do certify that the is the personal County since the witness and the witness a	JOHN W. CLARK
4	that I person y since y since as to as the first that I faith	Commissioner of Pensions

3-28-31

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."
 Additional affidavits may be attached if blank spaces are insufficient.
 All affidavits must be made before the Ordinary of the county of residence.
 Only widows who are married prior to first January, 1881, are estibled.
 Attach certified copies of marriage license it obtainable. If not, prove marriage, by some person, or by general reputation.

Instructions:

This Certifies that VIRGILLA HARPER MISS MATTIE F.SMITH WERE UNITED IN THE HOLY BONDS OF MATRIMONY By REV. H.A. WHITMAN On the 23rd day of OCTOBER . in the year of our Lord 1999 as appears of record in my office in Marriage Record, book 1874-1882 page 202 . This 17th day of MARCH, 1931 Robarts Lacy Orbinary.



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 Full on Price
Widow of May Rice
Widow of Jay 1991
Company J. 40 1991 J. W. LINDSEY. 11/15/11

Georgia Fulton County'

Personally before me came

who on oth says that ——have known for ——maker of passes Mrs Miranda Rice and Thos. Rice and know of their own knowledge that they have lived together as man and wife for the past ——the time ——have known than and that Thos. Rice left no real estate or personal property of any value, and know that Thos. Rice died on the ——day of ——1911 and that Miranda Rice is now his widow.

- Ju	OF GEORGIA,		0	
Perso	nally before me comes.	randa li	ice	of said County,
who, after b	eing dutysworn, on oath says	, that she is the widow o	1 /has. Ruce	to whom
day of.	186 and that she re	mained his wife, and res	sided with him to the da	te of his death
he was a re		he has not since him ea	th remarried. At the time	me of his death
was orothe .		Pension Roll of th	e State and paida pensio	n of 8
in	County for 1	9/per annum, or	n account of being a sold: (Volunteers of Sta	ier in Company
	e death of Mone			
	value of \$			
	property of any kind and of			
	ue, (State fully.)			
	Acres land			
	Horses and Mules	_		
	Hogs, Cows, etc			
	Total Cash value of	all property	, Z	2224
That	she is now a bona fide reside	nt citizen of said County	of July	and she
has so contin	auously resided sime	U stoley	16 NO	6
	of	Ordinary,	County.	
Affidavi	it of Witnesses to	Prove Marriage	and to Whom	na Date of
	-49	h of Husband		pate of
STATE	OF GEORGIA,			
	Cou	15		
	ally before me come	Lewis	known to	be responsible
and truthful	persons, residing insaid Cou			
	knowledge Mrs/Mrs.		.who made the foregoing	ng affidavit, is
the lawful w	idow of onomas / Co	who di	ed in Sulty	County in
said State o	on on	6 Ch day of	19//	and that she
	remarried. That she became	the wife of Hoo Luc and together some an	d yife continuously since	
- 1 N	111	and that the	10	
same man w	ho was on the pension roll of		from Jutter	_
	when he died.			
A property	A		00	
Sworm	and subscribed before me,	this the	Tecro	
hardy	day 191	100	X	*******************************
- Manual	- Carelan	Ordinary	_ '	
A STATE OF THE REAL PROPERTY.	100	July	County.	
	And the second	41/2		
Control of the Contro	State of the State of	Section 10 (\$4.00). 10 (\$4.00)	and the same of th	

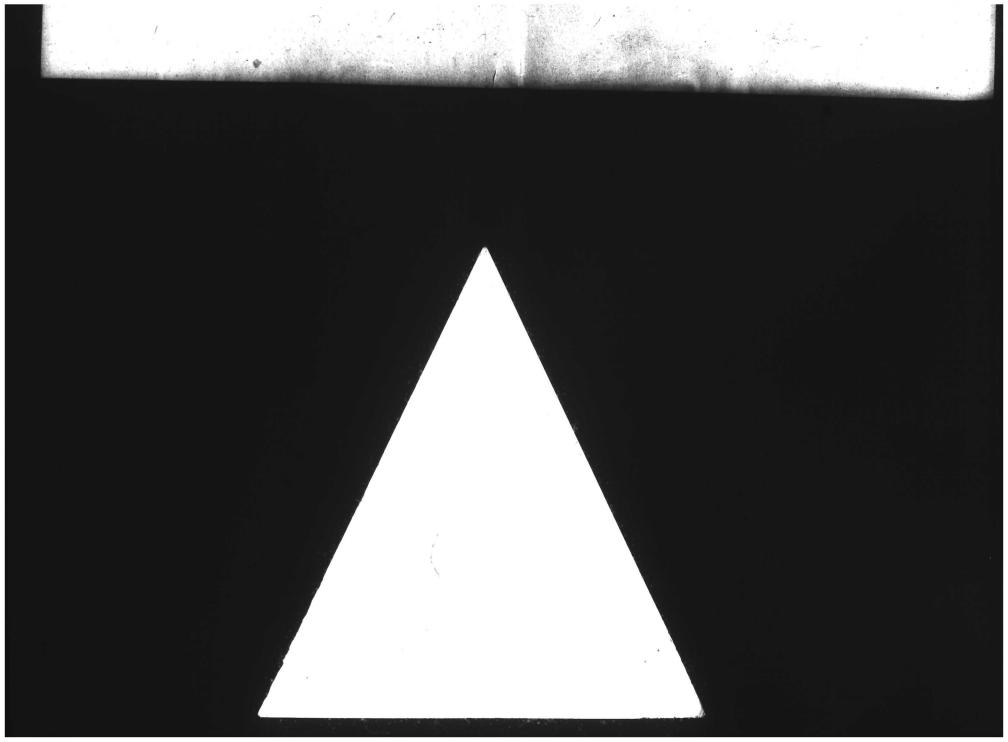
Georgia Rockdali Coverde Personaly Every lefue Me who as Gath sals that he was Proget un the first day of march 1868 and Sow Thomps Ride and marinda unde married by Rev Thomas Kindy My. Iwom To and Dobocaled before me this Nov 13 The 1911 las Book I we Mate Oulmay Rockdale Coduly

I book ording do leiting that - 9
am Brownally ruce as granded with I whole and his statements
an entitled to full faith and craiser
time under the hand and official
Lymatin This Nov 13th 1911 67 Com Crily

STATE OF GEORGIA

County.		

Personally before me comes	who after being sworn or
oath says, that they are freeholders of said County, and that the	nev know
said County and knew her said husband.	at his death on the
day of	Doggood and and a state of the
day of	
	₹ .
1 .10 //	
Total Control of the	se, possession and control of the following
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Sworn to and subscribed before me, this the	
day of	
Ordinary,	
of	
Name of the state	
OBDINA DVIG ORDEN	
ORDINARY'S CERTIF	ICATE.
STATE OF GEORGIA,	
Fultan County.	
In Johns B. William Ordinar	y of said County, do certify, that, I
the applicant for	this pension and that she is the nesson
and represents herself to be, and that she is a bona fide continuing	resident of said County and was on the
191	
That I also known 19 Persons	witness as to marriage and I also be
who I know to	be a regident for the later to the same the same to th
that all of the foregoing were duly sworn by me before signing the	a managina affiliation 1 .1
transfer and transfer of the seatements are entitled to full fa	aith and credit.
That the tax Books of Jantana County shows that	returned property to the
	for 1910, \$
Sworn under my hand and official seal of office this	49 day 191/
(SEAL.) Dhuff Will	0/1 / 1 0 - 1
// Seella	Ordinary.
J. J. Company	County.
NOTES 1. Before any questions are answered, the Ordinary shall swear app "You do solemnly swear that you will true answers make to eac you shall give will be the truth. So help you God." 2. Additional allidavits may be attached if blank spaces are insuf 3. All allidavits must be made before the Ordinary. 4. Only widows who married prior to first January 1870, are enti- 5. Attach certified copies of marriage license if obtainable. If n	plicant and the witness in the following words
2. Additional affidavits may be attached if blank spaces are insuf	ficient
3. All affidavits must be made before the Ordinary. 4. Only widows who married prior to first January 1870, are april	tlad
5. Attach certified copies of marriage license if obtainable. If n	of prove mersions by



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			County.
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to receive and receipt for the pension allowed and request that he result mane to. 1. What your mane get when they no middle (eyes files, compty and post office) 2. Man and where goal in what company and regiment did you called a wind of the file of the pension allowed and request that he result mane to. 3. Man and where goal in what company and regiment did you called a wind of the file of the pension allowed and result in most company and regiment did you called a wind of the file of the pension allowed and result in most company and regiment did you called a wind of the file of the pension allowed and result in most company and regiment did you called a wind of the file of the pension allowed and result in most company and regiment did you called a wind of the file of the pension where you disastered from nerving a file of the pension where you disastered from nerving a file of the pension where you disastered from nerving a file of the pension where you disastered from nerving a file of the pension where you disastered from nerving a file of the pension where you disastered from nerving a file of the pension and the pension of the pension where you disastered from nerving a file of the pension and the pension of the file of the pension where you disastered from nerving a file of the pension where you disastered from nerving a file of the pension where you disastered from nerving a pension of the file of the pension of the file of the pension where you disastered from nerving a pension of the file of the pension of the file of t	<u> </u>	· · · · · · · · · · · · · · · · · · ·	o make to the following questions, deposes and engages of following
Witness wy hand and easi this hay of 1997. Executed in presence of 1997. Bear when the presence o	of	1. What is your name and w	sere do you reside? (give State County and and and
Witness my hand and seal this. When and when seal is what complete and regiment did you mike are selved. When and when seal is what complete and regiment did you mike are selved. Before low one on parted did you discharge engaler military day? When, where seal the what company and regiment? C.J. When, where seal the what company and regiment? C.J. When, where seal the work of the seal of the s	to receive and receipt for the pension allowed and request that he remit came to	- Clina (Lie	-height - 12
When and when were you board		where did you reside on .	anuary 1st, 1894, and how long have you been a resident of this State
Witness my hand and said this. Executed in presence of 6. For how long a paried did you discharge regular military dusy? 7. When, where and under what disconnaisson where you dispharged from service of the control	at by	3. When and where were you	born on Henry Condition of 1000
Executed in presence of 6. How long did you remain in such company and regiment? Of 7. When, where and under what droumdances where you dispharged from surface 8. What is your present coccupation? 9. How wash one you eare (gross) per anomus by your owe exertings or short? 10. What has been your coccupation size itself believes the size of the following prounds do you have your application for present, which is following grounds do you have your application for present, which is following grounds do you have your application for present, which is following grounds do you have your application for present, which is following grounds do you have your application for present, which is following grounds do you have your application for present, which is following grounds do you have your application for present, which is following the present present present present, which is a final and complete history of the inferring and is seatont your expert present pres	Witness my hand and seal this	4. When and where and in w	het compeny and regiment did Con
8. How long did you remain in such company and regiment? 9. For how long a pariod did you discharge require military dusy? 10. When, where and under what elevantaneous where you discharged from serving? 11. When, where and under what elevantaneous where you discharged from serving? 12. How much care group per anoma by your own exercising on jabo? 13. What is your present occupation since 1886? 14. How we much do you have your application for profus, when there is no proposed to you have your application for profus, when the real proposed is not in such condition that your application for profus, when the your was the beautiful profused in the service of the inferred yand its estimate your support? If upon the second, give a full said complete history of the inferred yand its estimate your support? If upon the second, give a full said complete history of the inferred yand its estimate your support? If upon the second, give a full said complete history of the inferred yand its estimate your support? If upon the second, give a full said complete history of the inferred yand its estimate your support? If upon the second give a full said complete history of the inferred your display. 13. What property, effects or income do you possess and what property did you then return for taxa the property of the propert		-1001.	ng He Sorrald Co to 40 to 10
6. For how long a period did you discharge regular military duty? 7. When, where and under what elecumdances where you discharged from service your hand. The work of the period of the your present occupation? 8. What is your present occupation? 9. How much can you near (grow) per annum by your our exercitors or labor? 10. Upwas like been your occupation since 1889? 11. Upwas which of the following grounds do you to laws your application for profiler, via fire regular your occupation which the powers, "second "signification and powers," in such as they ground a state bow long you have been in which we have and when you put your sight. The which we have the simple of the power of the simple of the power which we have the simple of the power which we have the simple of the power which we have been an when you put your sight. The which we have the simple of the power which we have the power when and what proposety did you then return for taxa the power which we have the power which we will be a simple of the power which we have the power which which we have the power which which we have the power wh	}	5	
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9. How much any you are grown per anoum by your owe exertions or labor? 10. What his bears your occupation since 1868? 11. Upon which of his following grounds do you have your application for pendion, via. And we prove your occupation since 1868? 13. If upon the second, give a full and complete bistory of the infamily and its extent your emport? If upon the second, give a full and complete bistory of the infamily and its extent your analyses? If upon the second, give a full and complete bistory of the infamily and its extent your analyses? If the pending the pe		1 Spr Steel In	renderell at types stores I
10. What his bear your congastion since 1868? 11. Upon which of his following grounds do you have your application for pentfon, viz., first was proventy, "second vilatiratily and powerty" os third riblindess and powerty. Al. A. Y. The power of the ground, sits how long you have been in such condition that you could no your empore? If upon the second, give a full and complies blictory of the infamily and its extent your empore? If tupon the second, give a full and complies blictory of the infamily and its extent your empore? If tupon the second, give a full and complies blictory of the infamily and its extent your empore? If the power is the state of the power is the state of the power in the power in the state of the power in the power		8. What is your present occur	pation?
10. What has been your occupation since 1868 1. 11. Upon which of the following grounds do you has your application for possition, vin. first 'impoverty,'' second "infimity and poverty" or third "shipdenes and poverty"? "A way of the infimity and your support? If upon the second, give a full and complete history of the Infimity and its extent pages the shirld state whether you are togally-blaid and when and where you lost your alghe? 13. What property, effects or income did you possess and its gross value? 14. What property, effects or income did you possess in 1894, 1896 and 1896 and what disposition, it did you make of same? 15. In what property, effects or income did you possess in 1894, 1896 and itself and what disposition, it was not always to the complete the property of the property of the possess of the property of the pro	•	9. How much can you carn (gr	ses) per annum by your own exertions or labor?
18. What property, effects or income did you reside during those years and what property did you then return for taxable you make of same. 18. What property, effects or income did you possess and its gross value? 19. In what County did you resided during those years and what property did you then return for taxable your was possible to the property did you contribute the your yet your your years. 19. How were you supports out for each of those years and what property did you contribute the your your your years. 19. How were you supports out for each of those years, and what property did you contribute the your your own labor or income? And the your was your your you have you got your you have you got your you have you got your you have you you you you have you		10. What has been your occur	ation since 1868 ?
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13. What property, effects or income do you possess and its gross value? 14. What property, effects or income do you possess and its gross value? 15. In what County did you reside during those years and what property did you then returns for translation. 16. How were you supported during they years 1895 and 1896? They did you contribute they your own labor or income? 17. How maked did your support cost for each of those years, and what property did you contribute they your own labor or income? 18. What may your a family? If so, who composes such family? Give their means of support? Have a homesteed? 19. Have you a family? If so, who composes such family? Give their means of support? Have a homesteed? 20. Are you receiving any pension, if so what amounts and for what disability?	Ave.	poverty," second "Innemity and h	Warter on third (thirdness and necessarily and the same
18. What property, effects or income do you possess and its gross value? 14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, it did you make of same? 18. In what County did you reside during those years and what property did you then return for tax and the same and the property did you then return for tax and the same and the same and the property did you contribute the property did you contribu	Control of the second s	and the true ground, at	to how long you have been in such annilled at a
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16. How were you supported during the years 1896 and 1896? The assault of the search of those years, and what portion did you contribute the by your own labor or income? Assault of the search of those years, and what portion did you contribute the by your own labor or income? Assault of the search of the sear	We U	& detton Court	when return for taxation
17. How much did your support cost for each of those years, and what portion did you contribute the by your own labor or income? And 1896? What pay did you receive in each your employment during 1895 and 1896? What pay did you receive in each your family? If so, who composes such family? Give their means of support? Have a homestead?	the state of the s	16. How were you supported do	ring the years 1805 and 1806 9 B.
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19. Have you a family? If so, who composes such family? Give their means of support? Have a homestead? 20. Are you receiving any pension, if so what amount and for what disability? Swotn to and subscribed before me this the		by your own labor or income?	and to the land of the land.
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Sworn to and subscribed before me this the	TEN MILES	Chan	accord mo (means of Driver
Sworn to and subscribed before me this the	6 6 6	20. Are you receiving any pensio	n, if so what amount and for what disability?
The way the second seco			·
day of 1897.) Applicant Ordinary.		Sworn to and subscribed befor	Maria VIII
Colling.		day of dely	Applicant,
		The state of the s	Ondinary.

County.	STATE OF GEORGIA,
Joseph M Kingens of said State and County, having been presented	Quelton County. H. & Himmuns Mid
as a witness in support of the application of Shourab Rice	
under the Act approved December 15th, 1894, and after being duly among two comments	Personally came, before me. Att Scelles and
fortowing questions, deposes and answers as follows:	, both known to me as reputable physicians
1. What is your name and where do you reside? Justif h M Kity aus	of said sounty, who being severally sworn, say on oath that they have examined carefully
Bellwood avany baid county	
2. Are you acquainted with Mornes Rice , the applicant, is of	, appneant for pensage under the Act of 1894, and after
how long have you known him? I am. blever 34 and	such personal examination say that his precise physical condition is as follows:
3. Where does he reside, and how long has he been a resident of this State? Since, 1889 McMillan Strutt Julion lo	fullowing thally heat in both East and ly
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you	Walura de guiflantanation, the prouble sundan
know this? I do - I berved in The Sam Brigade	Frankonstitus would allow the of a support
	We further say on oath that the physical condition of applicant renders him unable to labor at any
At Caref Mannals . March to a 1862 40th Ga Inderty	work or calling sufficient to earn a support for himself, and that we have no interest in said pension being
6. Were you a member of the same company and reciment?	Ω
and the perform regular military duty, and what do you know of his service as a Confed-	Sworn to and subscribed before me, this
erate soldier, and the time and circumstances of his discharge from the service?	the / day of Zig 1897.) A. C. Summer M.
A Substitute in the first the same in the same in	- marin
as 30 dos se Josephanners	Ordinary,
8. What property, effects or income has the applicant? (Give your means of knowledge.)	
None Herry regularitance guith him for	ORDINARY'S CERTIFICATE.
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if	STATE OF GEORGIA.
any did he make of same? Prosessed work - No in come	}
La 12 meant	
10 What is the application of the state of t	I, Ordinary in and for said County, hereby certify that
10. What is the applicant's occupation and physicial condition? Coller lie'll france	the applicant. Thomas an Wine resides in said County, and was a bona
and stillisical Condition is had a solo	fide resident of this State on the first day of January, 1894, and that the witnesses, vis:
water than town yould his desard some hard hard	Lo In There is a Francisco of The Art
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is unique to support himself On account	are of trustworthy character and that their statements are entitled to full faith and credit.
if age and Phisical waknuss	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
12. How was he supported during the years 1895 and 1896? was Sulphon led	before same was signed.
13. What portion of his amount of that time	I further certify that the tax digests ofCounty show that applicant
13. What portion of his support for these two years was derived from his own labor or income? None for the latterns of the support of these two years was derived from his own labor or income?	entitioned for towards in the same 1 1000
14. Give a full and complete statement of the appliant's physical condition that entitles him to a pension	Volcats
under the Act of December 18th, 1894? Ald age and infrinity	wonano di property.
Not able to make a living by manual	No. 1 (1) 1
labor 9 19 100 2000	Witness my hand and seal of office, this 2 day of 1897.
5. What interest have you in the recovery of a pension by this applicant? Novel	Ordinary
Sworn to and subscribed before me, this	Of County.
the 3 day of 1897.	Before any questions are answered, the Ordinary shall swear suplicant and the witnesses in the following words: "You shall
Wathlelse I'M Surveyed	Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall shall not be used of you, and the ordinary you shall give will be the whole truth, so help you God." Additional affidavits may be attached if both moreous profited to the profit of the shall give will be the whole truth, so help you God."

STATE OF GEORGIA,		
County.		
Ĭ,	hereby	authorize
m constitution and the constitution of the con		
to receive and receipt for the pension allowed, and request that h	he remit	same to
by	-	-
Witness my hand and seal, thisday of		_1900.
Executed in presence of		[L. S.]

For Thes Already Emotion.

NO. 29.2

INDIGENT
SOLDIER'S PERSION,
1900.

JOHN. W. LINDSEY,
Commissions of Section

For Applicants Heretofore Allowed Pensions.

FUL	F GEORGIA,	County.	2	
Personal	ly appears The	\sim	of FUL	TON
County, State	of Georgia, who be	ing duly sworn,	says on oath that he	is a bona fide citize
and resident of	f said County and	State, and ha	s resided in said Stat	e continuously eve
since the	day of		1846; that he is	vears old and
by occupation a		; that he enlis	ted in the military se	rvice of the Confed
erate States (or	of the State of_	Sa_) during the war	hetween the States
and served for	the term of	i.	Company F., of	Cal Desimon
Ge V	alo		; that his phy	th Regiment of
follows:				
		Ginera	el debit	lite

that his proper	ty consists of the	following items		
)			27 H31
of the value of				100
and the second second second			Dollars, that by reas	son of his physical
tondition and p	overty ne is unable	e to support hin	self by his own exe	rtion or labor, and
that he receives	no pension but th	e one herein app	olied for.	
Deponent of	desires to participa	ate in the henef	4- 6 11 4	150
		ate id the belief	its of the Act, approv	ed December 15th,
1894, and the A	cts amendatory the	ereof, and makes	application for the p	ension to which he
1894, and the A is entitled for th	cts amendatory the ne year 1900. I ha	ereof, and makes ave heretofore	application for the p	ension to which he
1894, and the A is entitled for the county been allo	cts amendatory the ne year 1900. I have a pension for	ave heretofore	application for the p	ension to which he
1894, and the A is entitled for the county been allo	cts amendatory the ne year 1900. I have a pension for	ave heretofore	application for the p	ension to which he
is entitled for the county been allo Sworn to a	cts amendatory the ne year 1900. I haved a pension for and subscribed before	ave heretofore a the year 189 9 re me, this, the	as a resident of FU	ension to which he
is entitled for the county been allo Sworn to a	cts amendatory the ne year 1900. I have a pension for	the year 189 9 re me, this, the	a resident of FU	ension to which he
is entitled for the county been allo Sworn to a	cts amendatory the ne year 1900. I haved a pension for and subscribed before	ave heretofore a the year 189 9 re me, this, the	a resident of FU	ension to which he
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is entitled for the county been allowed as worn to a county been allowed as word as	cts amendatory the per year 1900. I have a pension for a subscribed before y of the period of the pe	the year 189 9 re me, this, the	a resident of FU	ension to which he
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State of G	ects amendatory the period of	the year 189 9 re me, this, the 1900. Ordin	sapplication for the pas a resident of FU	ension to which he
State of G I, W. H. co certify that I	eorgia, TON Contusted Cont	the year 189 greene, this, the leave me, t	a resident of FU	ension to which he LTON
State of G I, W. H. co certify that I pplicant in the	corgia, TON Contusted Corgia, Contusted Corgia Contusted	the year 189 greene, this, the leaves with the year 189 greene, this, the leaves of the year 189 greene, this, the leaves of the year 189 greene, this, the leaves of the year 189 greene, the leaves of the year 189 greene, and am well sainty and am well sainty leaves of the year 189 greene, and am well sainty leaves of the year 189 greene, and am well sainty leaves of the year 189 greene, and am well sainty leaves of the year 189 greene, the year	a resident of FU The Ris Man Ordinar Ordinar Lissed that the statem	y of said County,
State of G I, W. H. o certify that I pplicant in the is a his said affidate.	cts amendatory the ne year 1900. I he wed a pension for nd subscribed befor y of Corgia, TON Cor HULSEY, am well acquainte foregoing affidavit, rit are true, and I i	the year 189 greene, this, the 1900. Ordin	a resident of FU	y of said County,
State of G I, W. H. o certify that I pplicant in the is a his said affidate.	cts amendatory the ne year 1900. I he wed a pension for nd subscribed befor y of Corgia, TON Cor HULSEY, am well acquainte foregoing affidavit, rit are true, and I lead in this County.	the year 189 greene, this, the 1900. Ordin	ordinar Ordinal Resident the pass a resident of FU Public Control of Fu	y of said County, the ents made by him
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Norm.—The blank spaces must be filled.

Norm.—A fildavit should not be esterted before January 1st, 190

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	Ι,			***************************************		County.)				., here	eby	authoris	
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0 1	eceive	and	receipt	for	the	pension	allowed,	and	request	that	he re	emit	same t	
, y							,		***************************************		***************************************			
	Witn	ness n	y hand	l and	seal	this	(day of	•	-		18	99.	
	Exec	cuted	in pres	ence	of		{ _		***************************************	*******		· wee	(L. s.	

For These Aiready Enrolled.) No. J-6 G No. J-6 G INDIGENT SOldDIER'S PENSION 1899. Name Man. C. C. Name Man. C. C. Name Man. C. C. NAME ANT ISSUED RICHARD JOHNSON, COUNTY AMARKANT HANDED TO WARRANT HANDED WARRANT HANDE
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POWER OF ATTORNEY.

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llowed and	request that	he remit same to
	Control of the second	
day of		1901.
2. 1•3		. [I. S.
	at	ofllowed and request that atday of

INDIGENT SOLDIER'S PENSION.

JOHN W. LINDSEY,

WARRANT ISSUED

STATE OF CLUENA.

For Applicants Heretofere War

STATE OF GEORGIA.

Por Applicants Heretofore Allowed Pensions

TAL Whitenite melecrital Vilomed Leuslous

STATE OF GRODEL
STATE OF GEORGIA,
Mutton County
Dersonally appears The Rice of Tullan
County, State of Georgia, who being duly gworn
state, and has resided imaid State continuously
18 / b: that he is 0 /
that he enlisted in the
States, and served for the term of
of 40 Dels. in Company, of 40 th Regiment ; that his physical condition is as
follows:
General chaddly
that his property consists of the following items
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No. of the contract of the con
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 17.1
1004, and the Acts amendatory thereof, and makes application for the pension to which
is entitled for the year 1901. I have heretofore as a resident of
county been allowed a pension for the year 1 4 A.U
Sworn to and subscribed before me, this the
day of any 1901.
John RWilkinson Ordinary.
STATE OF GEORGIA,
Futton County.
County.
I, John A Wilkingon Ordinary of said County.
do gerring that I am well acquinted with the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said amdavit are true, and I know 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 Janey 1901.
John RWILKerson
Ordinary Fullow County
County.

Nors —The blank spaces must be filled.

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

	STATE OF GEORGIA,	
	I,	, hereby authoris
	to receive and receipt for the pension allowed, and request that	be remit same
	WITNESS my hand and seal, thisday of	1907.
	Executed in presence of	[L. s
v	A will be a will	
		All of Land
	SOLDIER'S PENSION *** SACT INDIGENT *** SACT INDIGENT *** SACT *** *	WARRANT HANDED TO ON W. BARRIDO, SPATE PRINTER, ATBERT.

Personally appears Note Nich Reine Personally appears Note Nich Reine County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citiz and resident of said County and State, and has resided in said State continuously existince the day of 18 ince the day of 18 ince the day of 18 ince the day of 19 ince the enlisted in the military service of the County of during the war between the federate States (or of the State of 19 during the war between the incompany 20 of 20 th Regime of 19 incompany 20 of 20 th Regime of 20 incompany 20 of 20 th Regime of 20 incompany 20 of 20 incompany 20 of 20 incompany 20 incom	STATE OF GEORGIA,	
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citize and resident of said County and State, and has resided in said State continuously ever since the		Tilton
and resident of said County and State, and has resided in said State continuously evisince the	The state of the s	CCL of
and resident of said County and State, and has resided in said State continuously evisince the	County, State of Georgia, who being duly swor	n, says on oath that he is a bona fide citizen
since theday of	and resident of said County and State, and h	as resided in said State continuously aven
that he enlisted in the military service of the Co federate States (or of the State of	since theday of	1846; that he isvears old and
States, and served for the term of in Company 2, of 2th Regime in Company 2, of 2th Regime ; that his physical condition is follows:	by occupation athat he	enlisted in the military service of the Con-
in Company 27, of 2th Regime ; that his physical condition is follows: Jan Albertaly	federate States (or of the State of	during the war between the
that his property consists of the following items. Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and hat he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th 894, and the Acts amendatory thereof, and makes application for the pension to which he sentitled for the year 1902. I have heretofore as a resident of the pension to which he sentitled for the year 1902. I have heretofore as a resident of the pension to which he sentitled for the year 1902. Sworn to and subscribed before me, this the day of JAN 13 1902 1902. County. John R. Wilkinson. County. County. Table 1 am well acquainted with the statements made by me in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902. Ordinary. County. Given under my official signature and seal, this day of JAN 13 1902. Ordinary. County. Cou	States, and served for the term of	in Company J, of Loth Regiment
that his property cousists of the following items. Of the value of	of	that his physical and the
Dollars, that by reason of his physics of the value of	follows:	(-y tondripp is as
Dollars, that by reason of his physics of the value of	I fun debility	
Dollars, that by reason of his physical production and poverty he is unable to support himself by his own exertion or labor, and hat he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th 894, and the Acts amendatory thereof, and makes application for the pension to which his entitled for the year 1902. I have heretofore as a resident of the year 1902. I have heretofore as a resident of the year 1902. Sworn to and subscribed before me, this the day of JAN 13 1902 1962. TATE OF GEORGIA, County. I John R. Wilkinson. Ordinary. Ordinary of said County and in his said affidavit are true, and I know he is the individual he represents himself to the and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902 1902. Ordinary. County. Ordinary. County. County. Given under my official signature and seal, this day of JAN 13 1902 1902. Ordinary. County. County. County. County. County. Ordinary. County.		y
Dollars, that by reason of his physical production and poverty he is unable to support himself by his own exertion or labor, and hat he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th 894, and the Acts amendatory thereof, and makes application for the pension to which his entitled for the year 1902. I have heretofore as a resident of the year 1902. I have heretofore as a resident of the year 1902. Sworn to and subscribed before me, this the day of JAN 13 1902 1962. TATE OF GEORGIA, County. I John R. Wilkinson. Ordinary. Ordinary of said County and in his said affidavit are true, and I know he is the individual he represents himself to the and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902 1902. Ordinary. County. Ordinary. County. County. Given under my official signature and seal, this day of JAN 13 1902 1902. Ordinary. County. County. County. County. County. Ordinary. County.	that his property consists of the following iter	119
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 894, and the Acts amendatory thereof, and makes application for the pension to which his entitled for the year 1902. I have heretofore as a resident of the pension for the year 1 Tollars, ounty been allowed a pension for the year 1 Tollars. Sworn to and subscribed before me, this the day of JAN 13 1902 1902. That Of GEORGIA, County. I Jehn R. Willinson. Ordinary of said County of the pension to which his said affidavit are true, and I know he is the individual he represents himself to the and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902 1902. Ordinary County. County. Ordinary County. County. Ordinary County. County. Ordinary County. County. County. County. Ordinary County. County. County. Ordinary County.		
Sworn to and subscribed before me, this the day of JAN 13 1902 1902. County. Learning that I am well acquainted with a well satisfied that the statements made by im in his said affidavit are true, and I know he is the individual he represents himself to any of JAN 13 1902 1902. Given under my official signature and seal, this day of JAN 13 1902 1902. Gradinary County. Given under my official signature and seal, this day of JAN 13 1902 1902. Gradinary County. Gradinary County. Given under my official signature and seal, this day of JAN 13 1902 1902. Gradinary County. County. Gradinary County. County. County. Gradinary County. County. County. County. Gradinary County.		
Sworn to and subscribed before me, this the day of JAN 13 1902 1902. County. Learning that I am well acquainted with a well satisfied that the statements made by im in his said affidavit are true, and I know he is the individual he represents himself to any of JAN 13 1902 1902. Given under my official signature and seal, this day of JAN 13 1902 1902. Gradinary County. Given under my official signature and seal, this day of JAN 13 1902 1902. Gradinary County. Gradinary County. Given under my official signature and seal, this day of JAN 13 1902 1902. Gradinary County. County. Gradinary County. County. County. Gradinary County. County. County. County. Gradinary County.	of the value of	Dollars that he can find the
Deponent desires to participate in the benefits of the Act, approved December 15th 894, and the Acts amendatory thereof, and makes application for the pension to which he sentitled for the year 1902. I have heretofore as a resident of 111011. Sworn to and subscribed before me, this the Sworn to and subscribed before me, this the day of JAN 13 1902 1902. County. County. County. County. County. County been allowed a pension for the year 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	condition and poverty he is unable to support	Donars, that by reason of his physical
day of JAN 13 1902. County. I. John G. Wilkinson. County. Coertify that I am well acquainted with Male Fick The applicant in the foregoing affidavit, and am well satisfied that the statements made by im in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902 1992. Ordinary County. Ordinary County.	s entitled for the year 1902. I have heretofor ounty been allowed a pension for the year 1 Z	e as a resident of 11ton.
County. I John R. Wilkinson. Ordinary of said County of certify that I am well acquainted with what Fich of the applicant in the foregoing affidavit, and am well satisfied that the statements made by im in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902 1992. Ordinary County.	Sworn to and subscribed before me, this the day of JAN 13 1902 1902.	Muss.
County. I John R. Wilkinson. Ordinary of said County of certify that I am well acquainted with A local County of the applicant in the foregoing affidavit, and am well satisfied that the statements made by my in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902 1992. Ordinary County.	TATE OF CEOPEIA	_Ordinary.
certify that I am well acquainted with A Rose Greek and I am well satisfied that the statements made by im in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902 1992. Grant Tableton County. Ordinary County.	STATE OF GEORGIA,	
certify that I am well acquainted with A Rose Greek and I am well satisfied that the statements made by im in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902 1992. Grant Tableton County. Ordinary County.	Solon OR W.	
e applicant in the foregoing affidavit, and am well satisfied that the statements made by in in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County. Given under my official signature and seal, this day of JAN 13 1902 1992. Ordinary County.	I, John St. Wilkinson	Ordinary of said County,
Given under my official signature and seal, this day of JAN 13 1902 1902. Ordinary County.	o certify that I am well acquainted with A	had fect
Given under my official signature and seal, this day of JAN 13 1902 1902. Ordinary County.	in in his said off dayle	rell satisfied that the statements made by
Given under my official signature and seal, this day of JAN 13 1902 1902. Ordinary County.	and that he resides in this Country	is the individual he represents himself to
day of JAN 13 1902 1902. Puril function ordinary County.		. /
Ordinary County.	Given under my official signs	ature and seal, this
Non- The black	day of JAN 13 1902	In Pullinson
	Ordinar	y County
Annual amount inch ha stressed before lannage 144 1000	NOTE.—The blank spaces must be fille NOTE.—Affidavit should not be attented	

State of Georgia, Wilton County. Personally appears County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously eversince the 1839; that he is 67 years old and by occupation a , that he enlisted in the military service of the Con-Wording) during the war between the federate States (or of the State of States, and served for the term of 3 / In Company 1, of 4 th Regiment _; that his physical condition is as 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, at the application for the pension to which he is entitled for the year 1907. I have here e, as a resident of_ County, been allowed a pension for the year 1906. Sworn to and subscribed before me, this the Jay of JAN 1907. State of Georgia, Fulton. ___ County. I, Jas 0: 4 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 2- 1907. Ordinary__

Affix your seal bers

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

	FATE OF			County	,.}				,		
	Ι,	-	**************************************	₩,	here	by au	thorize_				
to bv	receive and	100			. at					same	ţ.
	Witness my	hand and				y of				1903.	
	Executed in	presence	of	-	***************************************		***************************************	***************************************		[L.	s.]

Regiment 40 14

WARRANT ISSUED

(FOR THOSE ALREADY ENROLLED.)

214

SOLDIER'S PENSION

INDIGENT

1903.

Name Those fice

Fulton.

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WARRANT HANDED TO

JOHN W. LINDSEY,

(FOR THOSE ALREADY ENROLLED.) fulton Coun

SOLDIER'S PENSION INDIGENT 1904.

Regiment 70 M Fulton. Name __

WARRANT ISSUED

JOHN W. LINDSEY,

WARRANT HANDED TO

POWER OF ATTORNEY.

STATE OF GEORGIA,COUNTY.	
I,	
of	
to receive and receipt for the pension allowed, and request that	
Management and the second seco	
by	
WITNESS my hand and seal, thisday cf	1904
in the second se	[L. S
Executed in the presence of	

no date

STATE OF GEORGIA, Fulton. 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 1846: that he is_____years old and by occupation a. that he collisted in the military service of the Con. federate States (or of the State of) during the war between the States, and served for the term of in Company J, of 40th Regiment ...; 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 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 STATE OF GEORGIA, Fulton. John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with whose the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Affix your seal here County.

FUR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

Country
Fulton County.
Personally appears Thre Rice of
County, State of Georgia, who, being duly sworn, says on eath at a line
said County and State, and has resided in said County
10 // /
by occupation a that he cultured in the
federate States (or of the State of) during the war between the
States, and served for the term of in Company 7, of 16th Regiment
of Line ; that his physical condition is as
LYP.
that his property consists of the following items:
of the value of
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 17.1
and the Acts amendatory thereof, and makes application for the pension to which the
is entitled for the year 1904. I have heretofore as a resident of
) (
Sworn to and subscribed before me, this the Aher River Color JAN 20 1904 1904.
Jan Alle Kurson Ordinary.
STATE OF GEORGIA, County.
I, John R. Willimson. P D Ordinary of said County,
do certify that I am well acquainted with The Rice
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents his said
o be, and that he resides in this County.
Given under my official signature and seal, this JAN 20 1904
day of
Affix John AWilliams

Ordinary. County.

Nors.—The blank spaces must be filled.

Roya: Affidavia about his be at the total January lat, 1904.

INDIGENT

STATE OF GEORGIA.

Executed in the presence of

IER'S PEN

tate of Georgia,

COURTY

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Executed in the presence of

WITNESS my hand and seal, this day of \$0.01.5 in [1.8]

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

t me one id al materia and seal case hereby authorize

STATE OF GEORGIA.

POWER OF ATTORNEY.

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

COUNTY.

WITNESS my hand and seal, this day of

1905.

[L. S.]

hereby authorize

STATE OF GEORGIA,
County.
Pearsonally appears Monues Rice of Fig. 1.
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
by occupation a 216 Confidence of the Confidence State of the Confidence of the Conf
scherate States or of the State of the Con-
States, and served for the state of the State of the States.
States, and served for the term of 3 426 in Company , of. 40 th Regiment
follows: Infirmity and poverty
free poverty
<i>f</i>
that his property consists of the C.V.
that his property consists of the following items:
in the second se
of the value of
Dollars. I am now earning,
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
Sworn to and subscribed before me, this the has his the has a sword to and subscribed before me, this the
Ordinary.
STATE OF GEORGIA. /
County.
Ordinary of said County,
do certify that I am well acquainted with Thomas Rice
the applicant in the foregoing affidavit and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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
and the state of t
Ordinary & Ullut.

Note.-The blank spaces must be filled

Note. - Affidavit should not be attested before January 1st, 1905.

State of Georgia. 44.4400 County. Lee of Fulton Personally appears County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever 18 55 that he is 7 years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of Slangia) during the war between the States, and served for the term of July I in Company J., of 40 th Regiment that his physical condition is as 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 by my labor,... 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 Ordinary. State of Georgia, Ordinary of said County, do certify that 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_ Affix your seal here Ordinary County.

TAN ULLUANITO HENDIALAND WITHMEN LENSING

Norz.—The blank spaces must be filled.

Norz.—Affidavit should not be attested before January 1st, 1906.

NAME 2200, Thoma

YEAR LOOP COUNTY

WHEN AND WHERE BORN? 1000 Beary County, Co.

ENLISTED WHEN AND WHERE? March 1868 Comp Moderal4

RANK.

GOMPANY AND REGIMENT? Go. F. 40th. Regt. Co. Vols.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Particular account of exposure, stiff in left fost coused by army surgeon.

CAPTURED, WHEN AND WHELE?

RELEASED.

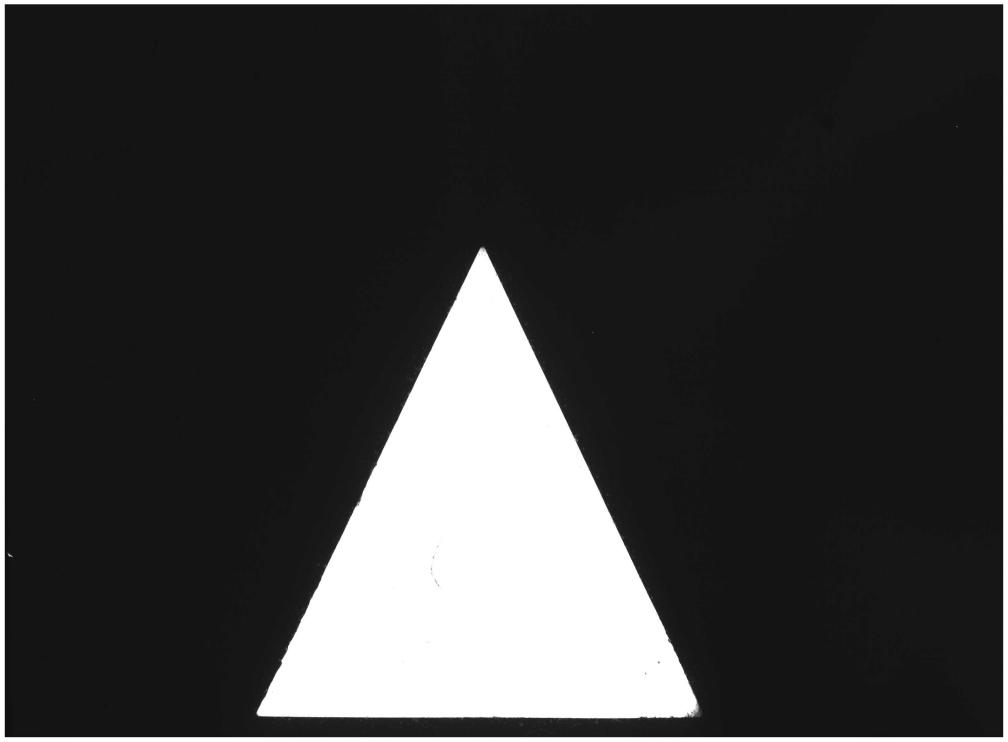
WHEN AND WHERE SURRENDERED? 1866 Greensbere, M.G.

IF NOT PRESENT AT SURRENDER, WHERE VERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. Joseph M. Eireus, same Registers He date.



190Ÿ-:... (ORN) We harden

County, County of the Penton of County, desiring or all State and County, desiring the and State and County, desiring the state of the state in the state of the COUNTY. to receive and receipt for the pension allowed and request that he remit same Witness my hand and seal, this. Executed in presence of remails a such contemy and segment? minut derendered and charged? 4. Were you present with your company and segment when it was surrendered.

4. If their present and surrendered is a dearly where you were, when you lest your command, for what cause and he when surjoint is a dearly where you were, when you lest your command, for what cause and he when your companies are surrendered.

5. Low much cap you were (160-) per answer by our own accretions or labor!

10. What are been your occupation since 1866.

11. Upon which of the following grounds do you and you application to ensure the fight, "age and poverty," second, 'infrantly and poverty," or third, "blindness and poverty."

12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infristive and in extent. If upon the third. 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 have your giptizes a \$200.

14. What were a secondly or means do your presses, and its gross value).

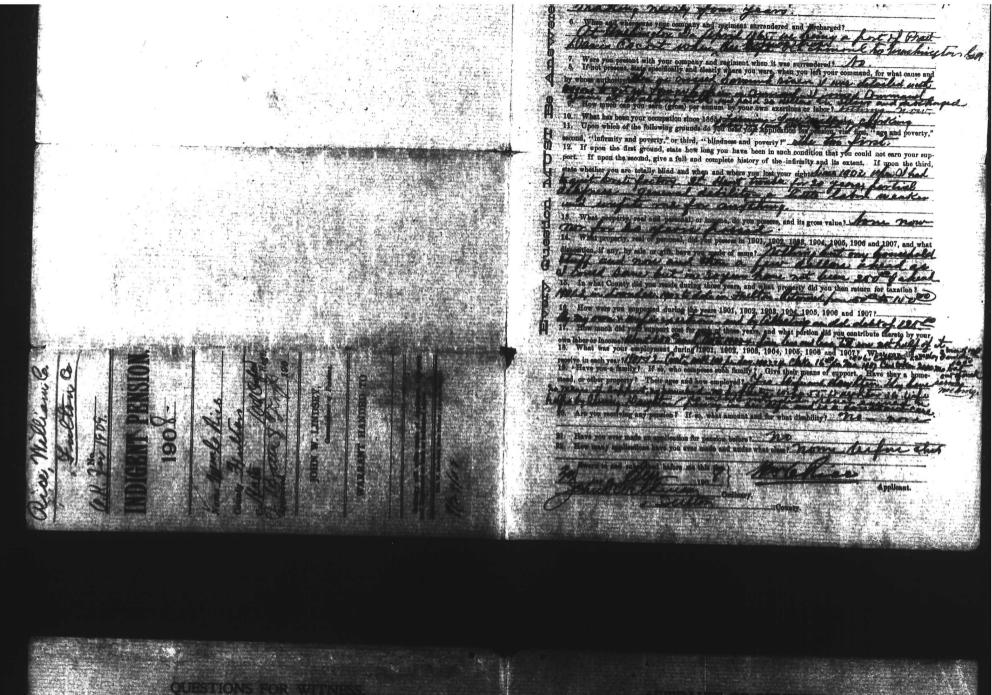
15. What could be secondly or means do your presses, and its gross value).

16. What could be secondly or means do your presses, and its gross value).

17. It was County did your district three years in 1801, 1802, 1868, 1804, 1805, 1806 and 1807, and what the state of the presses of the years of sum.

16. How were you supposed during the years 1801, 1802, 1808, 1806, 1806 and 1807?

17. It was much did not suppose one in the years and what portion slid you contribute merets by your own this was your supposed during 1801, 1802, 1803, 1804, 1805, 1808, and 1807? What was your supposed during 1801, 1802, 1803, 1804, 1805, 1808, and 1807? What presses the suppose with family? Give their means of support. Have they a home-induced years of the years of support. Their ages said how supposed? port. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third-And the second of the second s



STATE OF GEORGIA. What your ram, but the state of the sta long have you known him? S. Where does he also and how and also the state of the s Were party number of the most complete and removed. Haw has different process believes to the first force of the first party. When and when the constant of the first party. By what dividence the late ! 11. What purporty, effects or income has the applicant. (Give a December of the property of the following the state of the property of the state of the property of the state 11. Heliculopa hay by the maryle

16. The cut bings of their their 200, 100.

Ordinary, in and for said County, hereby earlify property; in 1908 Dollars of property: in 1906

STATE OF GEORGIA. Gordon County. of said State and County, having been presented William le Rice as a witness in support of the application of... under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows: 1. What is your name and where do you reside? I he tellis. Delhom Gordon County Gargie 2. Are you acquainted with.... the applicant; if so, how long have you known him?

Say Where does he reside, and how long and since when has he been a resident of this State?

Now Asserts in Mania Sea. Firsty years of Front

4. When, where and in what company and regiment did he enlist, and how do you know? W. b. Rice was transfured to him company from covery (Georgia Redgment) 5. Were you a member of the same company and regiment? Ins for Wigging Botting How long did he perform regular military duty? Two, With home their tur byens When and where was his command surrendered at Woshington Georgia . Will 1865 8. Were you present when it surrendered? 110 Was applicant present? 10. If he was not present, where was he? how on detail with forage hayour When did he leave his command? Dely a gay or two bedress or what cause the Secure forous for alley home By what authority he left? Betailed by Company, Commende How do you know all of this? I was in Command of Wisgins Bothy at the time and made The Asterial

11. What property, effects of income has the applicant? (Give your means of knowledge.) 12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1800, 1901 and 1902, and what disposition, if any, did he make of same? I throw withing of him our knowledge Continent was a how lovoring man like he left Gorden Camby 13. Has be conveyed away my of his property in the last four years; if so, what was it, and to whom? I have no knowledg of any 14. What is the applicant's pocupation and physical condition? I have not must explicant , for eight or ten years. and cannot tell 18. Is the applicant unable to support hipself by labor of any sort; if so, why?

I am informed but applicant is now getting inform:

I know the is getting old 16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? What portion of his supposs per mose four years was derived from his own major or moom I don't know 18. Give a full and complete statement, of the applicant's physical condition that entitles him to a pension under Beetlow 1254, Code? I not having meet applicant for Several years 10. Who composes family? What property pave they? Children's age and their earning capacity? I am informed that children are all games and by arried excelled and dong hier, I know nothing of their obility to help experience 20. What interest have you in the recovery of a panelon by this applicant? have forthe friends Sworn to and subscribed before me, this the J. Hansey

FAMILION TOU MILITEDS

1	Rice,	William	C.	145
K	6	Uter G.		277.
/			No. of the last of	1

..... County

Fulton

Application for **Expenses of Last Illness and Funeral**

(UNDER ACT OF 1919)

Thos H Jeffries , Ordinary

William . Rice (Name of Pensioner)

PAID TO ORDINARY ON THIS CLAIM: PAID ATE

824 Cxe 66 00 n Oxe

Approved, and ordered paid,

ALL HENSON, Director, Veterans Service Office.

Sal death it

Established Man

H. M. PATTERSON & SON

Spring Hill at Tenth ATLANTA, GA.

Sold to

Apr. 2, 1935

Funeral Expenses of Mr. William C. Rice To Our Complete Service Including Casket

\$257.00

22.50

10.00

SPECIAL DISBURSEMENTS FOR YOUR CONVENIENCE

Suit, Underwear, and Hose Long Distance Musicians

Less Discount

\$290.10

State of Georgia) County of Fulton)

This is to certify that the above is a true and correct statement of the funeral expenses of Mr. William C. Rice and same was paid in full on May 3, 1935 by Mr. Hehry R. Harris.

Sworn to before me this 23rd day of May 1935.

Mello M. Sloan

Notary Public, State at Large, Atlanta, Ga. My Commission Expires June 28, 1936.

la Matterson & Son

m. do humil get death on.

Received of Thomas H. Jeffries, Ordinary, \$ 150.00 to apply on account of _____ Wm. C. Rice I certify that this account has not been paid and is now owing to me. This 28 th asy of septembros 38. Received of Thomas H. Jeffries, Ordinary, the sum of for funeral expense of William I further certify that this account has not been paid and is now This 29 day of Chig. 1835. Spring R. Hor

and each year as it was north opents as the made and so veget of it light others a we just as near right orlings I remember

a wyment of Lapenses of Last liness and funeral

(Under Act of 1919)

(To be disbursed by the Ordinary)

GEORGIA, Fulton County:
Before me, the Ordinary of said County, comes Henry M. Harris by Mrs. Louise
H. Moore, of said County, who, after being duly sworn, on oath says
that he knew
erate pensioner, and that said person is the identical person named and described in the attached
certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of
ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted
o the sum of \$ 277.25 , as shown by sworn statements FULLY and COMPLETELY
TEMIZED, hereto attached.
Sworn to and subscribed before me.
his the 23 day of May 198 5 Henry & Harry
Buttuton coordinary. My stister
John Louise H Sure
2580 Peachtre Road
CERTIFICATE OF THE ORDINARY
GEORGIA, Fulton County.
I certify that Mrs. Louise a. Moore who subscibed
o the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and
redit. I further certify that I knew William C. Rice the deceased
ensioner referred to in the foregoing affidavit and that said deceased was at the time of death egularly enrolled as a pensioner on the records of file in my office. I further certify that said desased pensioner is the identical person named and described in the attached certified copy of burial ertificate, 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 27 day of 193.5.
(Seal of Ordinary) har the first 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, ving 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
4th. The Ordinary must see to it that each bill is perfectly beginning sufficient property to pay this bill.
attached neatly to this blank, after this blank has been properly completed and signed as indicated

- 5th. The completed voucher—this blank and the bilis—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.

NAME Sico, WALLES

YEAR 2000 COUNT

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

RANK.

COMPANY AND REGIMENT

NAME OF CAPTAIN AND COLONELY

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SUMPRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE

BURIED,

TARRESTS. - Salle Million Waster's Restore

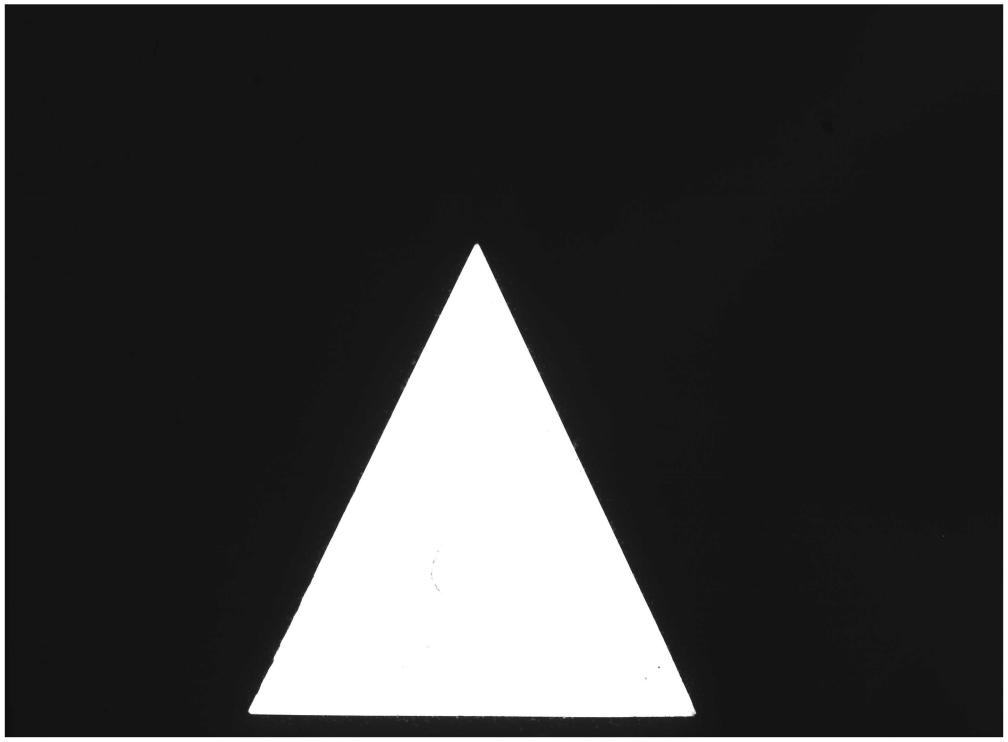
City or Town. Atlanta Length of residence in this city or town: Yrs. Mos. Do. MOH.RESIDENT (Yes or No). Firest and Number (No.) (Street). William Glaybon Rice Residence (City or Town). William Glaybon Rice Residence (City or Town). William Hill Rd. (Street and Number). Atlanta (State) Gd. PRESONAL AND STATISTICAL PARTICULARS S. IX (COLOR or RACE S. Single, Married Widewed Divorced (write the word) Male White Single (Street and Number). Atlanta (State) Gd. Male White Single Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or RACE S. Single, Married Widewed (William Glaybon Rice). Its S5 at 2 A. (COLOR or	Registered No. 212 (a) State of George or town: Yra. Mon. Ds. MON-RESIDENT (Yes or No)
City or Town ATIANTS Length of residence in this city or town: Yrs. Mon. De. MON-RESIDENT (Yes or No). Extract and Number (No.) (Birect) Extract and Number (No.) (Birect) Extract and Number (No.) Residence (City or Town) Willis Mill Rd. (Street and Number) Atlanta (State) Rd. PERSONAL AND STATISTICAL PARTICULARS FRESCONAL AND STATISTICAL PARTICULARS A COLOR or RACE [4 Single, Married Widowed] Diversed (write the word) Wildowed DATE OF BIRTH (mouth, day, resir) A DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF BIRTH (mouth, day, resir) A DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF BIRTH (mouth, day, resir) A DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF BIRTH (mouth, day, resir) A DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF BIRTH (mouth, day, resir) A DATE OF BIRTH (mouth, day, resir) B DATE OF BIRTH (mouth, day, resir) A DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF BIRTH (mouth, day, resir) A DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF BIRTH (mouth, day, resir) A DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF Mich. Si. 19. 35, at 2 Active of DATE (Mich. Day, Town) B DATE OF MICH. Si. 19. 35, at 2 Active of	or town: Yrs. Mos. Ds. MON-RESIDENT (Yes or No). Ref. Ward Smith concrete in a hospital, give its mane instead of street and number) B Rice t and Number) ASIGNER (State) GG. MEDICAL CERTIFICATE OF DEATH DATE OF Moh. 51. 19. 55, at 2 A. (Stewn) Bur. Year) I HERREST CERTIFICATE I attended the deceased from MEDICAL CERTIFICATE OF DEATH CHOICE SIZE 19. 55, at 2 A. (Stewn) Bur. Year) I HERREST CERTIFICATE OF A tentral of the deceased from Media Size 10. 35 to March SO. 18.35 Last naw hill. allve on 18.35 does lift to have occurred on the does and hose wheel showe. The of constant of the does and hose wheel showe. ATTENDO SCIENCES Tribles America of importance in the contributory causes of importance:
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[2] Tride, profession or particular surveys, becomes an experiment of the first of	Arterio sclerosia ther contributory causes of importance:
Indistry or business in which work as done, as cotton mill, samull, bank, etc.	Arterio sclerosia ther contributory causes of importance:
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11. BERTHPLACE (P. O. Address) Na. G. MAIDEN NAME MAIDEN NAME MAIDEN NAME ME. G. (P. O. Address) Na. G. Discrepance (P. O. Address) Mar. Bullion Mar. Bullion (Address) Mar. Bullion (Mar.	
11. HETHPLACE (P. O. Address) Na. G. MAIDEN NAME MAIDEN NAME (P. O. Address) Na. G. MAIDEN NAME (P. O. Address) MAIDEN NAME (P. O. Address) MAIDEN NAME (Manor) MAIDEN	
Was injury an accident, cuicide, or homicide? Was injury an accident, cuicide, or homicide? Where did injury access the country of the coun	t test confirmed diagnosis? (Specify whether sutopsy, operation, laboratory, or clinical)
MAIDEN NAME VARIABLE (P. O. Address) 13. BEFFILE (P. O. Address) (P. O. Address) Mrs. Bullion (Rigned) (Address) Mail Mail Mail Mail (Cognetery) Monros (Posselfice) Monros (Posselfice) Monros (Posselfice) Monros (Posselfice) Monros (Address) Mail Mail Mail (Address) Monros (Bigned) An H. Baskin M. B. W. Bldg. (Address) 14. Mail Bldg. 15. FILED ADr. S. 1925 16.	
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Computer	re did injury occurAtlanta R -1
(Rigned) Mrs. Bul Wilson Manner of injury Manner of injur	
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(Signed)	3879888 SQLEE SQLEE
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	med) Wm. L. Gilbert.
The state of the s	

Atlanta, Go.

Date ____AVEN et 20 _____1880 .

Director.

Chief, Bureau Vital Statistics.



POWER OF ATTORNEY.

(For Those Afready Enrolled.)		Bze	Witn	to receive :	l I,	STATE
INDIGENT SOLDIER'S PENSION, 1900.		Executed in presence of	Witness my hand and seal,	and receipt for the 1		OF GEORGIA,
Name H. P. Cichardo County FULTON	3		thisday of	pension allowed, at	of	County.
JOHN. W. LINDSEY.			of .	and request that		
WARRANT HANDED TO			1900.	he remit same	hereby authori	

For Applicants Heretofore Allowed Pensions.

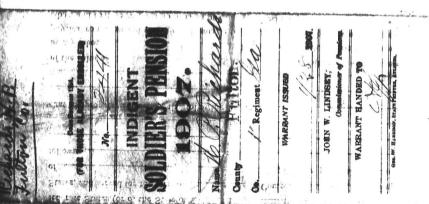
FULT	GEORGIA,	
Personally	appears AP	Richards of FULTON -
County, State of and resident of s	Georgia, who being said County and S	g duly sworn, says on oath that he is a <i>bona fide</i> citis State, and has resided in said State continuously e
since the Odic	LiterCos	18 ; that he is 2 years old a that he enlisted in the military service of the Confe
erate States (or of	the State of	Adming the war between the Own
Su Rise	e term of 6 M	in Company , of _ th Regiment
ollows:	1	; that his physical condition is
	· Sin	eal Clibility
hat his property	consists of the fol	
au and property	consists of the fol	lowing items
	1 4/24	
f the value of		Miletoniano de de Composições de Com
Deponent desi	pension but the or ires to participate	Dollars, that by reason of his physics support himself by his own exertion or labor, an ne herein applied for. in the benefits of the Act, approved December 15th
Deponent desi 994, and the Acts entitled for the y	pension but the or ires to participate amendatory therecover 1900. I have	ne herein applied for. in the benefits of the Act, approved December 15th of, and makes application for the pension to which heretofore as a resident of FULTON
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Nove, -A fidavit should not be attested before January 1st, 190

POWER OF ATTORNEY. STATE OF GEORGIA, County. hereby authorize to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this 1901. L. S. Executed in presence of SOLDIER'S PENSION For Those Already Enroll JOHN W. LINDSEY, INDIGENT WARRANT ISSUED

POWER OF ATTORNEY.

•	_ COUNTY. }		
	Mode his home		
- administration of minimum standards of a fact to said Mantherase standards and a said	of	, , , , , , , , , , , , , , , , , , , ,	*** ** ** ***** ***** ***** ****
to receive and receipt for the		request that	
by			
WITNESS my hand and seal	, this	_day of	1907.
Executed in presence of		· · · · · · · · · · · · · · · · · · ·	[1. 8.]



TATE OF GEORGIA,

STATE OF GEORGIA,
personally appears M. M. Charts. of Jullan
County, State of Georgia, who being duly sworn says on oath that I
state, and has resided in said State continuously
since the day of July 18 4 Landa Land
that he enlisted in the military service of the Con-
States, and served for the term of 11110 in Company
of In Reserver ; that his physical condition is as
follows:
Varisan detakelety
that his property consists of the following items
of the value ofDollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15:1
1634, 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 Tuntana
county been allowed a pension for the year 1 (1/11)
Sworn to and subscribed before me, this the
John R Wilkinson Ordinary.
·
STATE OF GEORGIA,
Multon County.
I, John & Wilkinson Ordinary or said County,
lo certify that I am well acquinted with Hope Recharity the
pplicant in the foregoing affidavit, and am well satisfied that the statements made by him
n his said affidavit are true, and I know he is the individual he represents himself to be
nd that he resides in this County.
Given under my official signature and seal, this
day of John R Wil Kinson

NOTE - The blank spaces must be filled.

Note -Affidavit should not be attested before January 1st, 1901.

Fulton County Personally appears Tolkon. 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 allahur 1846; that he is 60 years old and by occupation a Chat he enlisted in the military service of the Confederate States (or of the State of Stangia) during the war between the States, and served for the term of 6 Mesta in Company____, of ____ th Regiment ; that his physical condition is as 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 Fulton. County, been allowed a pension for the year 1906. Sworn to and subscribed before me, this the John R. W. Kinson Ordinary. K. F. Richard State of Georgia, Fulton. County. John R. Williamon 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_____ John OR William. Traffon.

State of Georgia,

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.

Executed in presence of

OLDIER'S PENSIO

1902.

WARRANT HANDED TO

10 Jula

sign of the state of the Laghert William of the marchine

TOR ALL DIORNIO DENETURURE ALLOWED PENSIONS.

	Fulton. County.
Person	ally appears HOP Richards of Fulton.
County, Sta	
and residen	t of said County and State, and has resided in said State continuously eve
since the	day of Birth 18 460 that he
by occupation	that he is years old and
	that he enlisted in the military service of the C
Contract Sta	tes (of of the State of
States, and	served for the term of 6 zero in Company, of Regimen
1	; that his physical condition is a
follows:	, that his physical condition is as
	trul debitety
. 0	
that his prop	erty consists of the following items

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of the value	of
condition and	Dollars, that by reason of his physical
Deponen	desires to participate in all 1
	participate in the benefits of the Act, approved December 17.1
	t desires to participate in the benefits of the Act, approved December 15th, Acts amendatory thereof, and makes application for the pension to the
	thereof, and makes application for the
is entitled for	the year 1902. I have heretofore as a resident of the pension to which he
is entitled for county been a	the year 1902. I have heretofore as a resident of
is entitled for county been a	the year 1902. I have heretofore as a resident of fulton and subscribed before me, this the
is entitled for county been a	the year 1902. I have heretofore as a resident of
is entitled for county been a	the year 1902. I have heretofore as a resident of fulton and subscribed before me, this the
is entitled for county been a Sworn to	the year 1902. I have heretofore as a resident of fulton and subscribed before me, this the day of AN 13, 1902 and subscribed before me, the day of AN 13, 1902 and subscribed before me, the day of AN 13, 1902 and subscribed before me, the day of AN 13, 1902 and subscribed before me, the day of AN 13, 1902 and subscribed before me, the day of AN 13, 1902 and subscribed before me, the day of AN 13, 1902 and subscribed before me, the day of AN 13, 1902 and subscribed before me, the day of AN 13, 1902 and subscribed before me, the d
is entitled for county been a Sworn to	the year 1902. I have heretofore as a resident of fulton and subscribed before me, this the day of AN 13, 1902,909.
is entitled for county been a Sworn to	the year 1902. I have heretofore as a resident of llowed a pension for the year 1 1901 and subscribed before me, this the law of LAN 13, 1902, 1902. GEORGIA,
is entitled for county been a Sworn to	the year 1902. I have heretofore as a resident of llowed a pension for the year 1 1901 and subscribed before me, this the law of LAN 13, 1902, 1902. GEORGIA,
sentitled for county been a Sworn to	the year 1902. I have heretofore as a resident of Rulton llowed a pension for the year 1 1901 Rulton and subscribed before me, this the day of 13, 1902, 1902, 1902, 1902, 1903, 190
sentitled for county been a Sworn to STATE OF	the year 1902. I have heretofore as a resident of Rulton llowed a pension for the year 1 1901 Rulton and subscribed before me, this the day of AN 13, 1902 909. GEORGIA, ULTON. County. R. Willinson. I am well acquainted with
STATE OF	the year 1902. I have heretofore as a resident of Rulton llowed a pension for the year 1 1901 and subscribed before me, this the day of AN 13, 1902, 1902, 1902, 1902, 1903,
STATE OF	the year 1902. I have heretofore as a resident of Rulton llowed a pension for the year 1 1901 Rechards and subscribed before me, this the day of AN 13, 1902, 1902. GEORGIA, 11100. County. R. Wilkinson. I am well acquainted with the foregoing affidavit, and am well satisfied that the statements made by affidavit are true, and I know he is the statements made by
STATE OF	the year 1902. I have heretofore as a resident of Rulton llowed a pension for the year 1 1901 Rechards and subscribed before me, this the day of AN 13, 1902, 1902. GEORGIA, 11100. County. R. Wilkinson. I am well acquainted with the foregoing affidavit, and am well satisfied that the statements made by affidavit are true, and I know he is the statements made by
STATE OF	the year 1902. I have heretofore as a resident of fulton llowed a pension for the year 1 1901 Rechards and subscribed before me, this the day of AN 13, 1902, 1902. GEORGIA, Ulton. County. R. Wilkinson. I am well acquainted with Conditional and well satisfied that the statements made by affidavit are true, and I know he is the individual he represents himself to resides in this County.
STATE OF	the year 1902. I have heretofore as a resident of fulton llowed a pension for the year 1 1901 Replaced and subscribed before me, this the day of AN 13, 1902 909. GEORGIA, 1110 County. I am well acquainted with County. I am well acquainted with the foregoing affidavit, and am well satisfied that the statements made by affidavit are true, and I know he is the individual he represents himself to resides in this County. Given under my official signature and seal, this
STATE OF	the year 1902. I have heretofore as a resident of Rulton llowed a pension for the year 1 1901 Rechards and subscribed before me, this the day of AN 13, 1902 909. GEORGIA, 11100. County. R. Wilkinson. I am well acquainted with Rechards or distribution of said County, at the foregoing affidavit, and am well satisfied that the statements made by affidavit are true, and I know he is the resident of the residence of the said county affidavit are true, and I know he is the said that the statements made by
STATE OF	the year 1902. I have heretofore as a resident of Rulton llowed a pension for the year 1 1901 Rechards and subscribed before me, this the day of 13, 1902, 1902. GEORGIA, 11100. County. I am well acquainted with Rolling of said County, at the foregoing affidavit, and am well satisfied that the statements made by affidavit are true, and I know he is the individual he represents himself to resides in this County. Given under my official signature and seal, this
STATE OF	the year 1902. I have heretofore as a resident of Rulton llowed a pension for the year 1 1901 Replaced and subscribed before me, this the day of 13, 1902, 1902. GEORGIA, 11100. County. I am well acquainted with Replaced County, at the foregoing affidavit, and am well satisfied that the statements made by affidavit are true, and I know he is the individual he represents himself to resides in this County. Given under my official signature and seal, this
STATE OF	the year 1902. I have heretofore as a resident of fulton llowed a pension for the year 1 1901 Report of subscribed before me, this the day of 13, 1902, 1902. GEORGIA, 11100. County. I am well acquainted with for a county of said County, at the foregoing affidavit, and am well satisfied that the statements made by affidavit are true, and I know he is the individual he represents himself to resides in this County. Given under my official signature and seal, this

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

Witness my hand and seal, this _____day of_____

Executed in presence of

INDIGENT

DIER'S PE 1903

DIER'S PEN INDIGENT 1904

WARRANT BANDED TO

POWER OF ATTORNEY.

STATE OF GEORGIA, 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 ______ 1904.

Executed in the presence of

FOR APPLIEANTS REPROPERE ALTHOUGH THE FRE

STAT	E OF GEOR	GIA,			
_ F	ulton.	County.		- 1	
	naily appears	-11/11/11/11	nde	of Fulte	
	tate of Georgia, who, be	eing duly ewoen		of A UALC	3.04534
and reside	nt of said County and	State and bee	, says on oath t	nat ne is a ooma j	ide citizen
since the _	day of Be	~ X	_18 26; that h	State continue	usly ever
		August, Walter to Branch St. School Strands, Barbaria	io_zw; that h	e is yes	rs old and
	ates (or of the State o	that he	consted in the r	ulitary service o	f the Con.
States, and	served for the term of	la mina) di	iring the war be	tween the
of L	a Review		in Company_	, of <u>/=</u> /A	Regiment
follows : _	10000		; that h	s physical coud	ition is as
ionows :	9 40	-	-	-	-
	<u> </u>				-
			· · · · · ·		
that his pro	operty consists of the	ollowing items		-	
		-			
				·	
of the value	e ofud poverty he is unab		_Dollars, that	y reason of his	physical
1894, and th	ent desires to participate Acts amendatory the or the year 1903. I h	reof, and makes	application for	the pension to	which he
county been	allowed a pension for	the year 1	- a resident of	magain daga daga daga daga daga daga daga dag	Approximation when
Sworn t	to and subscribed before	e me, this the	y	PR	chard
OTENTE	.1		dinary.		
	OF GEORGI				
	tulton.				
	An R Willing		0	rdinary of said	County
lo certify th	at I am well acquaint	ed with 16	Vicele	ande	
he applicant	in the foregoing affid	avit, and am we	I satisfied that	be statements	made by
um in nis sa	id affidavit are true, as le resides in this Cour	nd I know he is	the individual	te represents hi	mself to
	Given under m	y official signati	ire and seal, ski		1
		20 1903		A STATE OF STATE	
Affix) your Seal		(2)	PANOIO	Linson	
here			Little Committee Tale Committee	THE PARTY OF THE P	
	A COMMAND	Ordin	nary_\	7 - A - 1 - 1 - 1 - 1	County.

LAW WILLIAMIO UPWEIALAKE WILDARD LENZIONS.

STATE OF GEORGIA,
Fulton County.

County.
Personally appears H. P. Richardese
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 County
since theday of But to 18#6, that he isyears old and
by occupation a, that he enlisted in the military service of the Con-
rederate States (or of the State of
States, and served for the term of 22000 in Company of the Regiment
of Man Regiment ; that his physical condition is as
follows:
The second secon
ALA N
that his property consists of the following items:
Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he sentitled for the year 1904. I have heretofore as a resident of
Sworn to and subscribed before me, this the Adv of JAN 20 1904 1904
Agy of JAN 20 1904 1904.
O (Post of
STATE OF GEORGIA,
Fulton County.
I 7 . 7
o certify that I am well acquainted with fle, O. Chicks and County,
se applicant in the foregoing affidavit, and am well satisfied that the statements made
y him in his said affidavit are true, and I know he is the individual he represents himself
be, and that he resides in this County.
Given under my official signature and seal, this JAN 20 1904
day of
AME John A Westingon !
Oceanary Pariton County

Nors.—The blank spaces must be filled.
Nors. A fidevit should not be accepted before faminary let, 1904

POWER OF ATTORNEY.

STA	TE OF GEO			
		COUNTY.		
		Ι,		hereby authorize
			of.	
to rec	ceive and rec	eipt for the pension all	owed, and request th	hat he remit same to
		at		THE RESERVE TO STATE OF THE PARTY OF THE PAR
by ,				
	Witness my	hand and seal, this	day of	1905.
	Executed in t	he presence of	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	[L. S.]

COUNTY CONTRACTOR OF THE COUNTY CONTRACT COUNTY COU

POWER OF ATTORNEY.

STATE OF GEORGIA, COUNTY.	
COUNTY.	
Ι,	hereby authorize
to receive and receipt for the pension allowed, and request that	he remit same to
by	
Witness my hand and seal, thisday of	
Executed in the presence of	[L. s.]

Con Secret 124.
(FOR THOSE ALREADY EMBOLLED.)

No. 160

SOLDIER'S PENSION

1506.

Name & Mediment & County

Co. Mediment & Mediment &

no date

WARRANT HANDED TO

JOHN W. LINDSEY,

STATE OF GEORGIA,
Fulton_County.
Pearsonally appears L. P. Richards 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
by occupation a that he enlisted in the military remission of all C
federate States (or of the State of Hear Ala) during the
States, and served for the term of b Proof in Company, of Ath Regiment
of Sal,
follows: Infirmity and poverto
that his property consists of the following items:
of the value ofDollars. I am now earning,
by my labor, Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 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 He Richards
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
Ordinary.
STATE OF GEORGIA.
Fully County.
Ordinary of said County,
do certify that I am well acquainted with HO. J. Mchards
the applicant in the foregoing affidavit and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County. Given under my official signature and seed this. JAN 2 1905
Given under my official signature and seal, this JAN 2 1905
1900.
Affix
Ordinary County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1905.

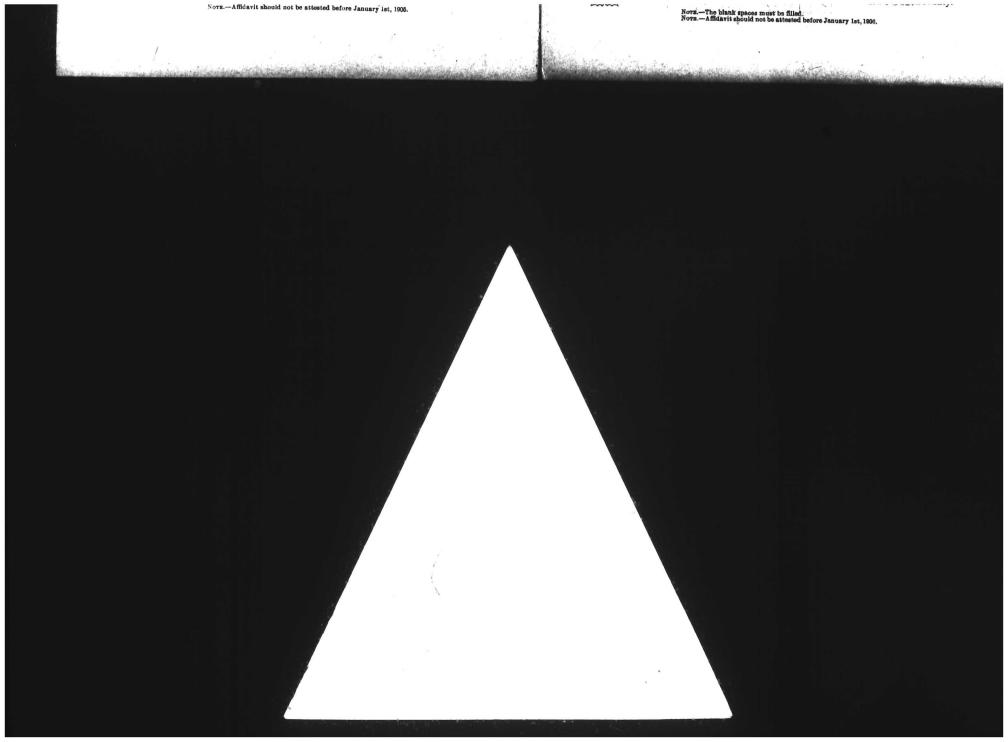
TAN WITHTAWARD HUNDSALAND WITHARD LRUZIOUS State of Georgia, F111400 County Fulfon Personally appears County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever 1896; that he is 59 years old and by occupation a , that he enlisted in the military service of the Confederate States (or of the State of_ Southern) during the war between the States, and served for the term of 6 Miss in Company , of Ath Regiment ; that his physical condition is as that his property consists of the following items:_ of the value of. Dollars. I am now earning by my labor,... Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the day of JAN 1 , 1906 in Muchenson State of Georgia, County. Ordinary of said County. do certify that I am well acquainted with, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this_



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

Ordinary

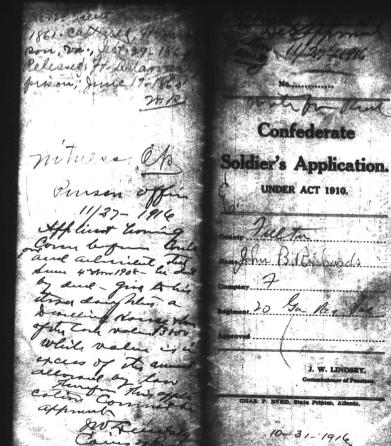
County.



Pension Office, Nov. 17th. 1916.

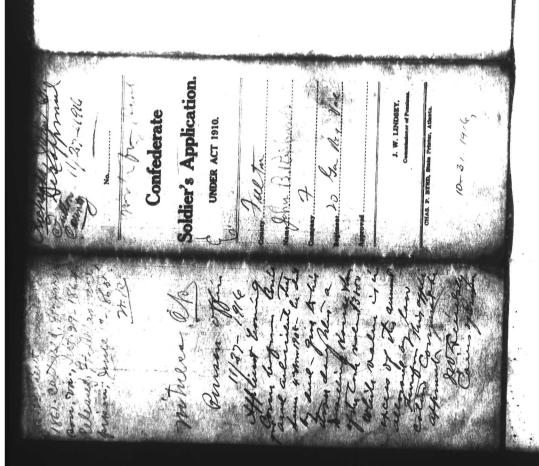
in excess ically of price and for what, prove the Applicante s tax value of property owned from 1908 to 1915 was greatly of the amount allowed by law, whet amend and state appealfment this property consisted, to whom sold and for what in what may the proceeds was disposed of and to whom and giving the name and amount paid to each and for what. Then existence of debts and the amount paid to each, accounting

#. Lindsey, Com. of Pensiom



for what, giving the name and amount paid to each and for what. Then prove the existence of debts and the amount paid to each, accounting fully for all this property.

J. W. Lindsey, Com. of Pensions.



STATE OF GEORGIA,
Lolum County.
for the pention provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with bis testimody to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:
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?
8. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1862?
4. When and wifere, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
(Give date of discharge) Trans and land and the state of discharge and Regiment?
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?
at 4. Manuary
More was your Command when you left it? W. Horrison, rem liel-
b. When did you leave the Command?
d. By whose authority did was beared
e. For how long was your lawyer.
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?
n. What effort did you make to return?
i. Were you captured during the war?
i. Were you captured during the war? J. If so, when, and where? In what prison were you held and when were you released? It. 9. What property of every description was owned in the war.
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.) Carrier state of property owner. Mrr. 4, 1904, burnet are specific 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? Soft and arms equities for the purpose since 4 Nov. 11. What property of any description of any kind and of any value now arms of the purpose of the purpos
11. What property of any description of any kind, and of any value powers and
11. What property of any description of any kind, and of any value now owned and in the use. New York of the secretary of th
10 W.
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? No.
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
not allowed? No. s.
Sworn to and subscribed before me, this the
day of March 1914
1 hart primary Ordinary
of tulla

County.	STATE OF GEORGIA,
Personally before me comes	County
who on oath	All in Par County.
says that they are freeholders residing in said County and we know	of said State and County is hereby presented
the applicant for pension and we know the property that is now in the use, possession and control of himself	as a ditness in support of the application of Jackson C. Randand County is hereby presented
and of its each value to wit: (Make List by items and value.)	by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded
	The state of the s
	1. What is your name and where do you reside? Charles . Wiellist
1.º What property, if any, has been sold or given away by the applicant since Nov. 4, 1908?	So colethora anue, artento, En
(State it fully by items.)	How long and since when he
	Since Johnson, 1964
2. When and to whom was it sold or given to?	3. Where does he now reside, and since when has he been a bona fide, continuing resident in this
and the price plate or stated to be paid?	State and how do you know? He new blacks of 281 9. Doublework in this
and the party to applicant!	Deligo attache, and la hoslind in Georgia sorraine show how
What disposition was made of the proceeds of the sale? Was the disposition of this property made in good faith and full values?	
or was it made to obtain a pension?	4. When, where and in what Company and Regiment did 1. B. Richards enlist during
	war from 1861 to 1865? (Give date and place) haben f. 10k ya leg bulishiful, 1, 1661
Sworn to and subscribed before me, this theday of191	5. How did you obtain your information of this Service? I service? A 20th you
Ordinary,	agricult wit Captain J. B. Mchist
ofCounty.	6. How long within your own personal knowledge did he perform actual military service with
	this Company and Regiment? (give date) Irrufuly 1.116 th mutte merebut light, Mylley
ORDINARY'S CERTIFICATE.	7. When and where was his Command surrendered or discharged (give date and place)
STATE OF GEORGIA,	an appromotor and Home, april 19, 1865
Ellan County.	A. Ware you personally and the same of the
70	8. Were you personally present at the Surrender?
Ordinary of said County, certify that I know	9. If not, where were you and how came you there?
the applicant form? Turney to Pension is the person he represents himself to be and resides in	10 W. d
said County. That I also know S. J. Sucklighter the witness swearing to the	10. Was the applicant personally present with his Command at surrender?
MANAGEMENT DATE:	11. If not where was he and how came him there? It was a prisoner of fr, Dila-
ervice and	bulling
ney are all truthful and trustworthy and their statements are entitled to full faith and gredit. That the	12. When did he leave his Command? Mr. whole Light M. 18 Lev. Where was his Command
ax Returns of Lutum & slows that form O. Mehands	when he left is? M. H. Lynnard, You for what cause did he leave? Carburate
also for the delication of (1/10)	By whose authority did he leave
or 1911 8 5505 for 1912 8 45 55 for 1918 8 5 500 for 1914 8 2000 for 1915 8 3450	long was he granted leave?
	ali that you have stated to be true? If of your own knowledge (Tell clearly and specifically).
Sworn under my hand and official seal of office this 36W day of Det 1916	his service I have the personal of live softens are office it occurst
Ordinary,	10 To the state of
of Firella	13. In what way was he prevented from returning to his Command?
OTES 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 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 freshelders unnecessary.	How do you know? Trous reports received of the time
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? Do not how.
3. All affidavits must be made before the Ordinary and certified by him. 4. If applicant has no property at all in his presented by him.	
the procession, use or control or sair amdavits of freshelders unnecessary.	15. Was applicant captured as a prisoner. If so, when and where? Own show
reconserve .	. Slower
Controlled to	after currently
	Sworn to and subscribed before me, this the
	Jay of 102 pol 4
, market and the second	(harthard)
	Ordinary,
	of tallan County

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

'You do solemnly awear 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.

(SEAL)

Questions	For	Applicants to Anguer
A 44 44 45 11 11 11 11 11 11	M. CHI.	ADDITIONS OF A SOLITON

STATE OF GEORGIA,
COUNTY.
John Be Ri chards of State and County, hereby applie
for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submit
his ewern statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions prepounded, answers as follows, to-wit:
1. What is your name and where do you reside! (Give County and
John B. Bi charge 65 & lith St. Atlanta
2. How long and since when have you been a continuous resident citizen of this State?
s. Did you entist in the Army of the Confederate States or in the organized willist
1001 10 1000 ; 4 98
. When and where, and in what Company and Regiment did you enlist? (Circ. 1)
Co. F. 20th Reg. Co. Vol.
o. 110w long did you remain in the actual military service with said Company and D
discharge 28-481-14-14-14-14-14-14-14-14-14-14-14-14-14
o. When and where was your Company and Regiment surrendered on distance of the company and Regiment
ALANAMAKIOX. 18. APRIL 9. 1865
We was surrendered on discharged by
o. If you were not actually present, state specifically and closely and
Transfer of Tolkari e
where was your command when you left it? _ At Fort Harrison near Richmond We
b. When did you leave the command . September 19, 1864
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?
ATT.
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! Yas, as above
i If so, when, and where! In what prison were you held and when were you released! _Sep_191864
Dear Richmond Va. held at Part Pelsware until about June 1, 1865
9. Are you drawing a pension of any amount from this State or the United States? Bo
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
ot allowed? No
Sworn to and subscribed before me, this the
Ohn Bleeten b
39 day of 1919
Ordinary)
Pales b County
EAL)

	multan COUNTY
	GDAS A J. Et sklighter of said State and County is hereby presented
•	as a witness in support of the application ofJohn Be Richardsfor 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? _Chas Kicklighter _ 50 Oglethorpe
	2. How long and since when have you known John B. Richards the applicant?
	Since 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! in Fulton Co Go and has lived here ever seventy
	years. I have known him over fifty years
	4. When, where and in what Company and Regiment did. John B. Richards enlist during war from 1861 to 1865? (Give date and place.) John B. Richards was Ist Lts of Co. F.
	5. How did you obtain your information of this Services
	6. How long within your own personal knowledge did he perform actual military service with this
	Company and Regiment (Give date) date -of-Of-sia-Richards -capture in Feb. 1864 to
	7. When and where was his command surrendered or discharged (give date and place)
,	At Appensitor, Ye. in April 1865
	8. Were you personally present at the surrender 1
	9. If not, where were you and how came you there t-
-	10. Was the applicant personally personally personal view by
	10. Was the applicant personally present with his command at surrender?
	11. If not where was he and how came him theref. Was prisoner.
	12. When did he leave his command
n	hen he left itt. Near_Ri.chme.ndFor what cause did he leavetwastaken_prisoner
-	By whose authority did he leave and how
0	ng was he granted leave?How do you know
Ī	I that you have stated to be true? If of your own knowledge, tell clearly and specifically. I was member f same company of which John B. Richards was tat Ltr and saw him daily row seb. 1864 until September 1864 when he was captured near Richmond 13. In what way was he prevented from returning to his command? Was taken prisoner
H	ow do you know!
-	14. What effort did he make to return to his command and how do you know?
	Hald as prisoner after his capture in Sep. 1864
	15. Was applicant captured as a prisoner Xea If so, when and where? Near Bichmond Vs
_	in Sep. 1864 In what prison was he held? Fort Drisvars and
/h	en released After surrander in 1865
	Sworn to and subscribed before me, this the Charles of Kicklighter
7	
•	Fulton Condinary
	County.)

(SEAL)

. F.lin Bichards, John D.

YEAR ASSO COUNTY BURGO

WHEN AND WHERE BORNY Resident of Councils over 70 pages.

ENLISTED WHEN AND WHERE? Suly 7,1861 - Cherokee County, Ga.

RANK:

COMPANY AND REGIMENT? Co. F. 20th Co. Volunteen's Regt. Infertural

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE? Copt.10.1004 Bear Blobasst, Va.

RELEASED; From Port Delomero, Mal. about June 1045

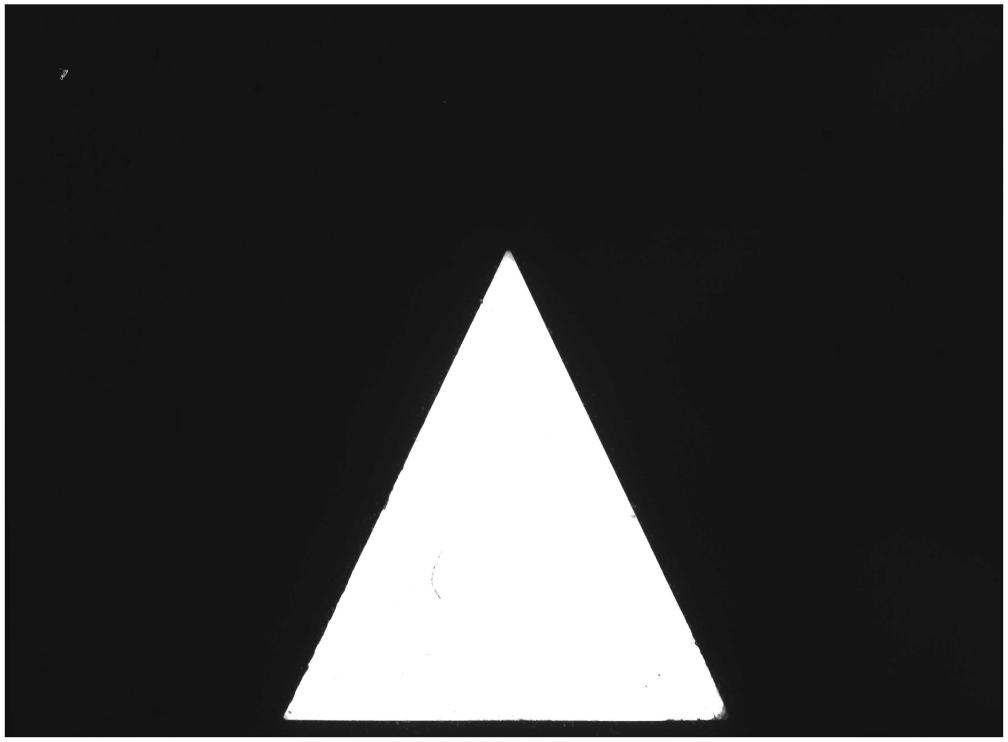
WHEN AND WHERE SURRENDERED? Command outside April 1,2000 at

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? IS ADDICED AS THE

DIED, WHEN AND WHERE?

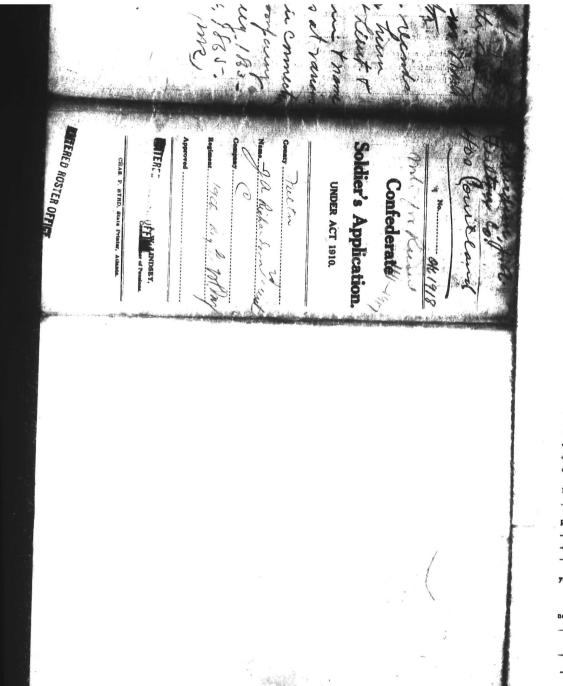
BURIED:

VITNESSES: Starles 7. Mobilester----- See Commit-



In Record Confederate Soldier's Application. UNDER ACT 1910. County Tuetn

ERED ROSTER OF



Questions for Applicants to Answer.

STATE OF GEORGIA,	
STATE OF GEORGIA,	
County.	
WILLIAM AND IT	
of 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	
A A A A A A A A A A A A A A A A A A A	
1 How long and since when have your hand and have country and Post-office). At How long and since when have your hand have been hard to be the since when have your hand have been hard to be the since when have your hand have been hard to be the since when have your hand had been hard to be the since when have your hand had been had be	, 1
2. How long and since when have you been a continuous resident citizen of this State?	4
Will from 12th Slave you been a continuous resident citizen of this State?	,,-
from 1861 to 1865? A the Army of the Confederate States or of the Organized Militia of this State	Muon
from 1861 to 1865? Any of the Conjecterate States or of the Organized Militia of this State 4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Any 12 (Aug. 1861) and 1864 and	/
When and where and in the C	
of Service) Many 1 of Aug. 1861. at 1862 at 18	
5. How long did you remain in the actual Military Service with said Company and Regiment?	
(Give date of discharge)	
A den and where was your Company and Dominant	. 1
Commerce you actually present with a true Time Time Aurunder 9 km 12 stands	mº6
	. 1
	N
THE PARTY OF THE P	3
a. Where was your Command	2
Manual Ma	9
b. When did you leave the Command?	
c. For what cause did you leave?	
d. By whose authority did you leave?	- 1
e. For how long was your leave granted? In what way?	
	- 1
f. Why did you not return to your Command after leave expired?	- 1
g. 11 what way were you prevented?	
h. What effort did you make to return?	
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	2
and its each value on the 4 Nov. 1908? (Make list by items and value.) I make 3 !! (! Annust 2 value of the state of the	1
2 mis 3 my st & brush the 1904 for \$3100 2 owned my other	
THE WALL THE	
what property of any kind have you disposed of and for the	-
1908. To whom and for what price? I have designed of all the real tests I	
A STATE OF THE PERSON OF THE P	Apri
There an compression of worth of One are a transfer have by real ista	标
12. What annual or monthly income on complete	
y and the pount of any amount from this state on the TT-14. 1 or	
and how aver amplied for the General Pension and had to	
sworn to and subscribed before me, this the	
24 day of July 2017 July ar son	
Than A Add	
Ordinary	
1 In Can	

County.
IK P Countin
as a witness in support of the application of CAM AND The Taken
by the Act of 1910, in said State, and flow by
by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:
1 (- 10)
A. Alantaga
From boyling 65 w 70 years the applicant?
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this
state and now do you know? 4011 About Clark St Allantes 60
Because I have lived here during that time minus
4. When, where and in what Company and Regiment did . Stuck and a what a way and a segment did .
4. When, where and in what Company and Regiment did. A Richard Com
5. How did you obtain your information of this Service? I within at the Lam am
and in as I ame regiment
6. How long within your own personal knowledge did he perform actual military and the
this Company and Regiment? (give date)
7. When and where was his Command surrendered or discharged (circ data and all all all all all all all all all al
1865, in N. Co. near greenstrough
8. Were you personally present at the Surrender? I was not
9. If not, where were you and how came you there? I was on special duty at Newman ya I was detailed for 5 pecial duty.
10. Was the applicant personally present with his Command at surrender? HE Coul
11. If not where was he and how came him there?
12. When did he leave his Command? When the army Surrannes Where was his Command
when he left it?for what cause did he leave?
By whose authority did he leave
long was he granted leave?
all that you have stated to be true? If of your own hand to me to
Conging to the Same & & regiment & Knowing that he was hars, loyal
13. In what way was he prevented from returning to his Command?
How do you know?
14 What first Male and the second sec
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner. No
In what prison was he held?and when released
Sworn to and subscribed before me, this the
day of 191 7
Land of Mason El Ordinary

STATE OF GEORGIA.
County:
Personally before me comes
says saas they are freeholders residing in said County and we bear
and of its each value to wit: (Make List by items and value.)
 What property, if any, has been sold or given away by the applicant since Nov. 4, 1903? (State it fully by items.)
2. When and to whom was it sold or given to? 3. What was the price pred or attack of the control
What was the price paid or stated to be paid? What relation is the party to applicant?
was made of the proceeds of the sales
Was the disposition of this property made in good faith and full values? was it made to obtain a pension?
or was it made to obtain a pension?
sworn to and subscribed before me, this the
day of191
Ordinary,
ofCounty.
ORDINARY'S CERTIFICATE.
TATE OF GEORGIA,
7,10
County.
I. ARTHUR R. MAREUT Cordinary of said County, certify that I know
SU County. That I also know MUTY 2/14 Keef & 16 (1/ AV 0/ U.
rvice and W. W. Was dearn The C. Wisslam who are fresholders, that
ey are all regidents of said County and
sy are all residents of said County and were day sworn by me before signing the foregoing affidavit and
Returns of
shows that
lue for tax is in 1908 8
for 1015 a
Sworn under my hand and official seal of office this
Ordinary,
ofCounty.
THE 1. Before any questions are answered the Codinary shall seemed the

	tullar County.
	leafel M St. II
	of said State and County is hereby presented
as a w	
by the	Act of 1910, in said State, and after being sworn true answers to make to the questions
	What is your name and where do you reside? Waleb W. Slipheus De Kach Carmin Ja.
••••	How long and since when have you known G. The Lardium the applicant?
3	Where does he now reside, and since when her he
State as	now no you know? The court frain the arrange is
	July Jul Man
war from	When, where and in what Company and Regiment did A. Richardton enliet during a 1861 to 1865? (Give date and place) Aug 1.4. Big Hands La Co. 19 4 4 a Re.
#	How did your betain your information of this Bervice? I was with him
6.	How long within your own personal knowledge did be need to be
enus Com	pany and Regiment? (give date) Way / 84 / 10 War / 84 \
7.	When and where was his Command surrendered or discharged (give date and place)
8.	Were you personally present at the Surrender? Use
	If not, where were you and how came you there?

10.	Was the applicant personally present with his Command at surrender? If not where was he and how came him there?
12.	When did he leave his Command?
when he l	oft it?
	By whose supporter did by l
long was	By whose authority did he leave
all that me	he granted leave?
ап ылат ус	u have stated to be true? If of your own knowledge (Tell clearly and specifically)
18.	In what way was he prevented from returning to his Command?
How do ye	ou 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
	Desagna rate with the control of the
Swo	m to and subscribed before me, this the day of many 1917
1h	orthogen Ordina
	+ Hellen

STATE OF GEORGIA tullon These & Madom who on oath says that they are freeholders residing in said County and we know J. alechandson the applicant for pension and we know the property that is now in the use, possession and control of him. self 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 No 1908! (State it fully by, items.) 300 Alasung St. de S. When and to whom was it sold or given to! May Class for de S. What was the price paid or stated to be paid! What relation is the party to applicant v. home But nothing 5. What disposition was made of the proceeds of the sale? 6. Was the disposition of this property made in good faith and full values ?... or was it made to obtain a pension !.... Sworn to and subscribed before me, this the 660rdinary of tullon Ordinary's Certificate STATE OF GEORGIA. RMachitles Ordinary of said County, certify that I know for Pension is the person he represents himself to be and resides in said County. That I also know Jek P. Carllen & W. W. Stephens the witness swearing to the service and N. W. Wisclam Tha E. Wisclain 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 for 1912, \$; for 1913/\$; for 1914, \$ 3373; for 1915, \$ = ; or 1917, a 10000; for 1918, a Sworn under my hand and official seal of office this 30 NOTES 1. Before any questions are answered the Ordinary shall swear applicant sad all witnesses in the following words: "You do sciemnly swear that you will true answers make to each question asked you and the evidence rots shall give shall be the whole truth; so help you God."

3. Additional affidavith 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 annecessary.

severa any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: "You do sciently swear that you will true answers make to each question asked you and
the evidence you shall give shall be the whole truth; so help you God."

2. Additional affidavits must be made before the Urdinary 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 unaccessary.

NOT DS.

In order to avoid suncessary delays to applicants, and to enable all parties interested to understand the laws gracting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted:

and fully set forth by applicant and physician, and followed by a plain statement of facis stowing the extrict of the disability. If applicant claims disability from disease contracted in the service, a full advantable stated history of the disease should be given, tracing the disability by positive panels to the service.

1. The law and a allowance for an arm or leg unless the arm or leg has been contracted substantially ascless, but the first and the first and the first arm of the limb and examinally parties.

1. The law and a submance for an arm of leg unless the arm or leg has been the first and the law of the Act in reference to the arm on the limb and the limb and the limb and the law of the Act in reference to the arm on the limb and the law of the law of

t be made under ours been dily sworn to.

been dily sworn to.

been dily sworn to.

be extined by the Ordinary of the county of the residence to any other will not be received in any case.

several counties are specially requested to call the attellipin

W. H. HARRISON, Clerk Ex. Dept.

Commit

... LOKE

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.

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

4. If the papers are returned for correction and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must

show that the amendments have been duly sworn to.

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

6. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

7. No payments can be made for any past year.

W. H. HARRISON. Clerk Ex. Debt.



STATE OF GEORGIA. Bulton County. PERSONALLY appears R. P. Richardsonof 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 continuously since the 1860; that he enlisted in the military service of the Con-of South Caroling Volunteers Ma Gound's Brigade; that whilst engaged in such military service at the battle of Jeven Pinis in the State of Virginial, on the 30 day of Many wounded as follows: by gun shot woundlin right ride of of heart which wound reflected therenews of both eyes cans ing loss of eight in right eye, and infining the left eye is much that deponent samuel tell block from white acres a soon. Deponent was also wormere in some battle by mining or muchet ball entering top of instep of left foot, and ranging backmand and out at through the heel. Deponent also from this wound, last two loss from said left foot. This wound renders said andle slift. and senders, said left leg permanently, and sules unitedly Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder, ending October 26, 1890. Sworn to and subscribed before me this the 17. 12. on a Sw the disability, and explain particularly the extent of isease, tracing it directly to the service.

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA

PERSONALLY came before me.	of the county
of State of Georgia who being dul	of the county
Desce of Georgia, who, being ably swor	n, says that he was
commissioned officer in Company of Regiment	of .
Volunteers, and that deponent knows, and the	of he mand of al
and th	at 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	ioregoing amuavit,

as stated by him in said affidavit. Deponent further states that said is a bona fide citizen of this State and resides

Sworn to and subscribed before me this?

day of

PERSONALLY came S. J. Richardson James Morris county, in said State who being duly sworn, say that they are well acquainted with Richardson and know, from having been with him in the army, that he received the wounds (or contracted the disease) in the military service, as attated by him in the foregoing affidavit; that said wounds (or disease) permanently disabled applicant as stated by him; the said applicant is a bona fide citisen of this State, and resides in county) and we are well statements in his affidavit are true. Sworn to and subscribed before me, this Audin Co gar STATE OF GEORGIA, Tull Come Personally comes before me deserves Galhoure Ordinary of said county, I Hammond and M. la . Asher ball known to me as reputable physicians of said county, who, being severally aworn, say on oath that they have carefully examined H. P. Richard and after such examination say that the applicant has been injured as follows: A ball (fire bable, a muster ball,) willend the left foot at top of in and langed backward and ait at and thrown heel. He also last two toes on some foot, and has sectioned such other injuries from counted in battle that book upon (the right up expecially) are little was to him. The character of and wounds and injuries and supplies that the life for and supplies to Sworn to and subscribed before me this foels have more the day of Mar the 1890 ME HOLE MAN Who achome fail am or led being the but of north

The physicians will date fully the extent of the would shift their give flow to show the latter of the the artist charleng that godes, also had life them in Alberta manerales also care

Julton Guit. I. D. Lowelley Callo Ordinary of said county, do certify that I am well acquainted with a la la character the applicant in the foregoing affidayit, and am well satisfied that the statements made by him in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief.

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

Given under my official signature and seal, this Janday of 1800. I Cochmil

County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Know all Men by these Presents, That A.

Richardson

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 wastever 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 same for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason

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

Executed in the presence of the

uma Pri

If allowed, send smoont by

STATE OF GEORGIA, Saules County. I. Or & Localismo Ordinary of said County, do certify that I am well acquainted with Ordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is divibled, 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 of day of January 1891. Ordinary Truller County.	STATE OF GEORGIA, County, I. Ordinary of said county, de certify that I am well acquainted with P. D. County. the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he repesents himself to be, and that he resides in this county. Given under my official signature and seal, this I day of the law of the l
Application for Allowance Application for Allowance The Consist, Amount, A. I. 4. Date of Werran, A. I. 4. Entered on econd Entered on econd WARTHAMED TO WARTHAMED	Solubles of the state of the st
Annual to Manager Allowed Personal	SIATE OF GEORGIA. **Plassiviting and resident of Georgia, who beind dry worm, says and the cite and resident of Georgia, and has a confinent by the cite and resident of Georgia, and has a confinent by the cite and resident of Georgia, and has a confinent by the cite and resident of Georgia, and has a confinent by the cite and resident of Georgia, and has a confinent by the cite and resident of Georgia and has a confinent by the cite and resident of Georgia and has a confinent by the cite and resident of Georgia and has a confinent by the cite and resident of Georgia and has a confinent by the cite and resident of Georgia and has a confinent by the cite and resident of Georgia and the cite and ci

STATE OF GEORGIA,	STATE OF GEORGIA,
# 11 -	SAIL OF GEORGIA,
Personally appears Robert P. Redandon of Hallon County, State of Georgia, who, being duly sworn save on each that	- Feetlan County
Court Service of the Suchander of Hulland	Presentativ appears R. P. Chickery
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and	County Con.
resident of said State, and has resided therein continuously ever since the	on eath that he is a bona fiels citizen and resident of Georgia, who, being duly sworn, says since the day of Georgia, and has been such continuously
day of State (or of the State up)	since the day of day of 1800; that he enlisted
federate States (or of the State of) during the way by	in the military service of the Confederate States (or of the State of
states, and served as a state of States, and served as a Solution of States an	during the war perween the States and remain
of S. le. Volunteers ello & Grane 's Bright of Megiment	of th Regiment of Civil Volunteers M. Cyana 's
in such military service at the battle of Service Brigade; that whilst engaged	Brigade : that whilst engaged in such will
in such military service at the battle of Service Princes in the State of Prince on the day of Many 1862, he was wounded as follows: That we less from the state of the service of the ser	Brigade; that whilst engaged in such military service at the battle of Certain Visit of day of
wounded as follows: That was like the was	on the day of
of los los of and and a	1862, he was wounded as follows: (and a
The same of the sa	The second secon
	and the same of th
	Annual control of the
	The state of the s
Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowed to the control of the contro	Deponent desires to participate in the benefits of the Act approved Ostal
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 as the control of the second of	the acts amendatory thereof, and makes application for the allowance to which he is entitled for
for the year ending October 26, 1891. I have heretofore been allowed a pension of dollars, for	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
Sworn to and subscribed before me, this, the day of Telescope 1891.	Sworn to and subscribed before me this the day of 1892. April 2000 1892. April 2000 1892.
L' Sobre me, mis, me Robert & Best and	and subscribed before me this the
day of 1891.)	day of 7/1/21 1892.
To to be callow ordina	
Nors State fally 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.	Nove.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.
POWER OF ATTORNEY.	POWER OF ATTORNEY
STATE OF GEORGIA,	STATE OF GEORGIA.
· }	£
Know all Manhathan	County.)
Know all Men by these Presents, That I,	Know all Men by these Presents, That I,
of County, State of Georgia, do hereby appoint	of .
E No.	County, in said State, do hereby appoint
me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the Georgia by reason of the injury received as aforesaid in the military service	my true and lawful attorney in fact, for from the State of Georgis by reason of the injury received as aforesaid in the military service of 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 hereupte set my here with the content of the reason aforesaid.
of the Confederate State of Georgia by reason of the injury received as aforesaid in the military service	from the State of Georgis by reason of the injury received as a four Many be entitled to
ing my said autorney to receipt in my said autorney to receipt in the integral amdavit; hereby authorize	the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorising
nor, or for any sum of money which may be as a limit that may be issued by the Gover-	or for any sum of money which may be coming to may be issued by the Governor.
WITHESS WHEREUP, I have hereunto set my hand and seel this	IN WITNESS WHEREOF I have hereunto set my hand and seal this
day of1891.	day of the control of the con
	Executed in the presence of us:
Executed in the presence of us:	Executed in the presence of us:
The state of the s	mand of the
	16 out 11 (164) 101 4
DERECTION.	The second secon
Send money to me as follows, by	DIRECTION.
10	Send money to me as follows, by
County, Georgia.	P. O.
county, Georgia.	P. O.

State of Georgia) In person comes Sulton County. S J. S. Houmand, Ma. J. and, in auswer to questions from the Executive department regarding infusies to R. P. Richarden after being swom, sags: The eyes were injured by a reflex action of name centers, caused by an external force against the base of the skull. The lig is rendered substantially useless on account of the bones in the foot and ankle heing shetterest, the stiffing of the ankle foint and loss of muscular form resulting Therefrom. The lass of two Toes does not recessarily render a leg practically useless. but under certain conditions might do so. In this connection, deponent desines to say that there is only one of the toes that is absolutely gone, but the condition of the piece of one that is injured from same would is such that in my spinion he would be better The it was entirely off, Seven to X subseribed bufore my Miches 8th 1840. Joel Haumond K. Maper. Asterl hellon Comity /a.

Maimed Soldiers.

Voucher No. 2369.

Amount \$ 10.

Audited

Paid 10 P. Rich arrison

For Loss of 2 toes

Mar 8

Included in warrant No.

issued to Treasurer

WARRANT CLERK.

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

appleant

STATE OF GEORGIA. EXECUTIVE DEPARTMENT.

:10,00

per above voucher, this

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

No. 2669 Allanta, Sa., March Lingo.

Mr. R. Richardson of the County
of Hullin 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
He is entitled to receive the sum of The Foot Dollars
for such disability, the same being the allowance due for the year ending October 24, 18 90
The Treasurer will pay the same and hold his receipt on this voucher, and return same
to Executive Department for warrant.
By the Governor, Governor.
W. H. Harrison
CLERK EXECUTIVE DEDINGS

8. of Marchaelor

Audited

1891.

Maimed Soldiers.

Voucher No. 83

1891.

COMPTROLLER GENERAL.

Paid to Robt P. Richardson rators 2 lass.

Dely 4

Included in warrant No.

issued to Treasurer.

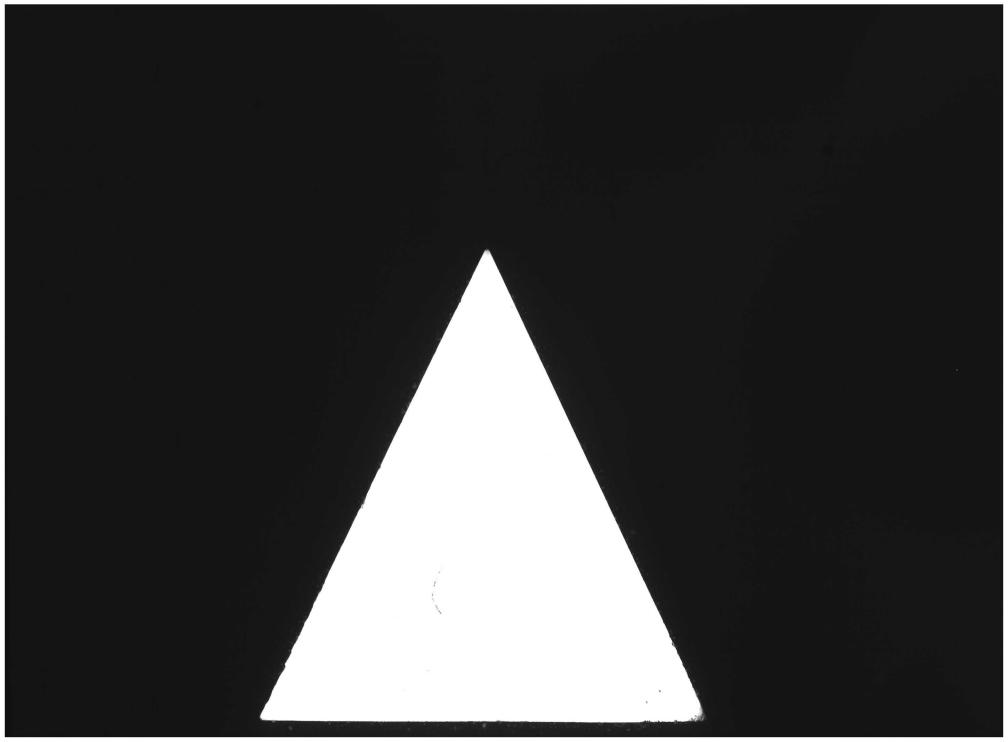
1891.

WARRANT-CLERK

applicant

STATE OF GEORGIA,	111 1	, Sa Tel	
Executive Department.	Quanta	r, Ga. Seve	1 1891
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Mr. Robt P. Re	i la	100	_
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of Dimin	havin	ng filed his applicat	ion in the Executive
Department for an allowance under the	Act approved	October 24, 1887, a	as amended by Act
approved Dec. 24, 1888 and Nov. 11, 1889	, and the same	having been exami	ined and allowed for
Lass of chro De	4		
He is entitled to receive the sum	70	en + 00,	Dollar
for such disability, the same being the	10 10 Ta	7	Donai
		he year ending Octo	
The Treasurer will pay the same and	told it receipt	on this voucher a	nd return same to
Executive Department for warrant.	BAUSA3	/ 1	\mathcal{O}
		7. J. 2	main.
By the Governor,	,	V	GOVERNOR.
Wistan	š		
21 Journ		TIVE DEPARTMENT.	
		DE MINISTE	
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10			
Received of R. U. HARDEMAN, Treasure	id- C.	(C)	
	r of the State of	il Georgia.	
Jeur oox			Dollars,
er above voucher, this	Reb		1801
	Korn	3	1891.
	1741	10h and	-

1891. No. 83



No.		i
INDIGENT PHISION		
Namy MARCHAR.		
depressed to a		1 2 2
WARRANT HANDED TO		
Was College		

Courty	Conserve
1	The state of the s
	A Short - Wy Nacle of said State and County, having been presented
to receive and receips for the pension allowed and Jequest that he result store to	as a Minese is support of the application of the support of the s
	carrein to follow:
W.	1. What is your name and where do you reside? I Shufe, Wy Hall
Witness my hand and seal, this day of	Type ga
	2. Are you acquainted with the church on the applicant; if so, how
Executed in presence of	long have you known him?
	A lunches and now long and since when has be been a resident of this State?
	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?
	the state of the s
	8. Were you present when it surrendered?
	9. Was applicant present? Ray of
	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?
	A CONTRACTOR OF THE PROPERTY O
	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, 1905, 1906 and 1907,
	17 200, 1000
	and what disposition, if any, did he make of same?
	18. Has be conveyed away any of his property in the last four years; if so, what was it, and to whom?
	14. What is the applicant's occupation and physical condition? Harmany and husbang
	finesal debelita
	Water control of the format of the first of
60 and one of the state of the	15. Is the applicant unable to support himself by labor of any sort; if so, yhy?
	Actournt for evel de britte
	16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?
	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
	Bestlon 1954, Gods
は接続はこれを持つというのでは、自然は、自然は、自然は、自然は、自然は、自然は、自然は、自然は、自然は、自然	
(2) (2) (2) (2) (3) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	10. Who composes family? What property have they? Ohlidren's ages and their earning capacity?
	more on and during
	20. What interest have you in the recovery of a panelon by this applicant?
	Smorn so and subscribed before me; this the
	for all 190 Wines,
	Ordnery (1/ 7/1/1/

STATE OF GEORGIA,	CT VI OF SHOROLO	
Personally came before me & C		
Jas. n. Brawner, both known to me as reputable physicians	in the second second second	County desired
f said Councy who, being severally sworn, say on eath that they have examined carefully were . H.		
, applicant for pension under Section 1256, Code, and after such personal examination say that his precise physical condition is as follows:	A STATE OF THE STA	The second second
Infirmacy transcer assisting from 70 (70)		
les up several climes decrine del	A Transfer De Base Transfer	
night.		
and that we have no interest in said pension being allowed E. C. Consequence and who had been sent and pension being allowed.		
On the office of the control of the		and health and war a San Table
Sworn to and substribed before me, this the star of the transfer ordinary.	And the second of the second of the second to the	Wei -
ORDINARY'S CERTIFICATE.	Water substitution	y left your consumns, for what cause and
STATE OF GEORGIA,	1 The specimen of the property of the second	
Killin Country.	W. D. Words and Commission, 12 and	
Shut William Original College	A COURT OF STREET, OR STORY CONTRACTOR	and the state of t
that the applicant J. M. Richardson resides in said County, and has	Topic of month proud sale has long on here long	to such condition that you could not say your up-
been a bona fide resident of this 8 the since the day of 189	poet. If spor the second, give g (ul) and complete history of each whether you are totally allied and when and where you is	The state of the s
and that the witnesses, yis,		1.1
are of trustmenthy character, and that their statements are entitled to full faith and credit.	13. What properly, real and personal, or income, do you pos	
I further certify that before answering the foregoing questions the applicant and each witness took the oath	14. What property that or percent, cide our some in 1901.	1902, 1908, 1904, 1908, 1908 and 1907
hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.	discoulded if may, by made or gift, have your made of many fact	
I further certify that the tax digest ofCounty shows that applicant		7.0
returned for taxation in his name in 1901	A THE STREET COURSE OF SHEET SHEET AND	property did you then return for tension?
property, and in 1902Dellars of property; in 1908	A.A.	Yan y
Dollare of property; in 1904		08 18024 1805 1905 Inc 18075
Dollars of property; in 1905	the story much of larger proof on the each of back one of	of what posters did you constitute thereto by your
Dollars of property; in 1906	or a line of the community of the contract of	0 , 1908 1906 and 1907. What pay did you
Dollars of property; in 1907		A CONTRACTOR OF THE PERSON OF
In my opinion the foregoing claim is	2000 or Openions), the result in China Call	
In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this day as the		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Some Contract Contract		The state of the s
County		
Nora	And the second section is a second second second	
words: "You shall true answers make to each of the questions asked of you, and the witnesses in the following the whole truth, so help you first."	A CONTRACTOR OF THE STATE OF TH	
Additional addards may no associat if there is not use incollects. In every one the Ordinary must confirm the associated as incollects.		and the second

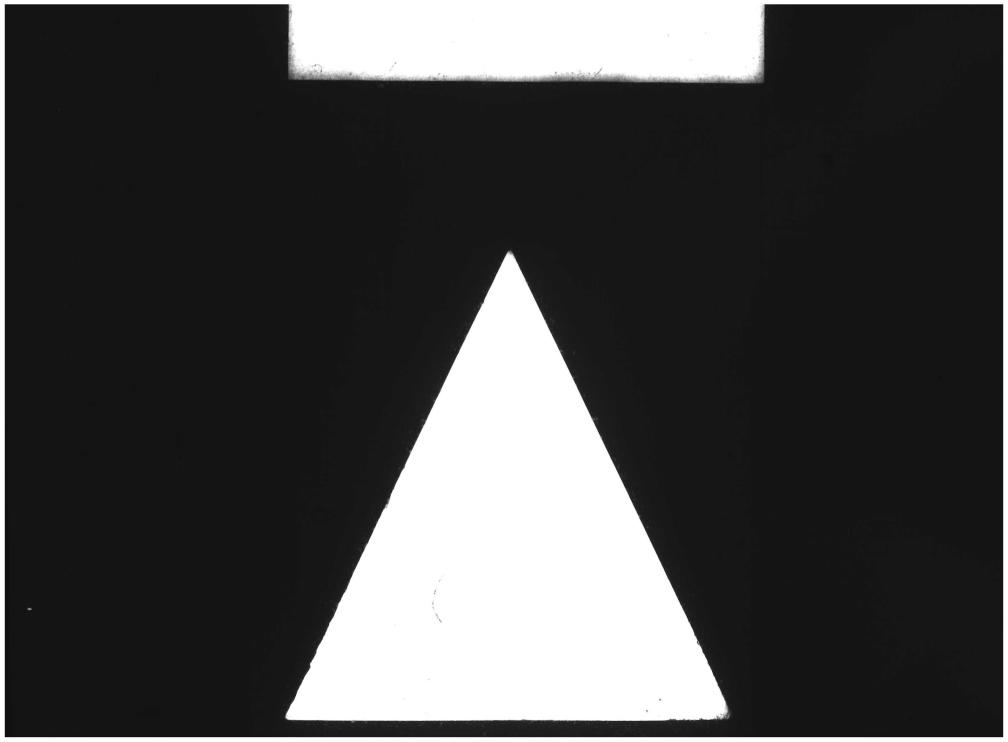
State of Georgia, Floyd County.

Fersonally came before the undersigned officel J.A. Sharp and ".J.Hd Hall, well known to said attesting officer as being of trustworthy character and entitled to full faith and credit who being duly sworn say on oath that they are personally well acquainted with Thomas H. Richardson and served in the confederate army with him in copmeny "G" agad.Ga.Regt. Wrights Brig. Mahone' Div- and that he enlisted on the 14th.day of August 1861 at Spring Creek Floyd county,Ga. and was mustered in at Camp McDonald on the 21st.day of August 1861 and that he served until the surrender of General Lee at Appomattox va.,that they know of their own knowledge that he did honorable service.

Further that they have no interest in the recovery of a pensision by this applicant, and that they no nothing of his present condition physically or financially.

Sworn to and subscribed before me, this December 370.1908.

Ordinary Floyd County, Ga.



July Co harden Wm. M. foregoing affidavir, and am well satisfied that the statements made by him Ng 4440 Application for Allowance and that he is disabled, to the extent he chains, and I know he elf to be, and that he resides in this County. Date of Warrant, and the said affidavits and CLUS 14-14-BECRETARY SECURITY OUT ANTHO WARRANT HANDED TO

1.7.66

STATE OF GEORGIA

Frulling County. A Louchan __Ordinary of said County, do certify that I am well acquainted with mwile, Rehald en 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 10 day of 211 1891. Orth Cecehon County. I during this iven between the FINIT OF BEORGIA For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

PENSION SOLDIERS

STATE OF GEORGIA.

Fraction County.

m. & Loudson Ordinary of said county, do certify that I am well acquainted with W. M. Richard and the

applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the

individual he repesents himself to be, and that he resides in this county.

Given under my official signature and seal, this 2" day of Mo neck 189 2

Ordinary Frelow

STATE OF GEORGIA,	STATE OF GEORGIA,
Huller County.	STATE OF GEORGIA,
Personally appears 200 Me Personally of Quiling	Fluctione County.
County, State of Georgia who have all the statements of the data	PERSONALLY appears
County, State of Georgia, who, being duly sworn, says on oath that he is a done field citizen and	County Canal Co
	on oath that he is a bona fide citizen and resident of Georgia, who, being duly sworn, says since the
1840; that he enlisted in the military service of the C	
federate States (or of the State of States, and served as a	in the military service of the Confederate States (or of the State of
	during the war between the States (or of the State of
of Volunteers My Service at the battle of John Service in Serigade; that whilst engaged	during the war between the States, and served as a Sanata in Company of 38 th Regiment of
in such military service at the battle of 2 de august in the State	of 38 th Regiment of Service Volunteers Gordon 's
of ra on the 18 day of range in the State wounded as follows: A modern of range in the State	But the tribit chigaged in such military service at the Land
wounded as follows: Show on the 28 day of Page 1862 he was	
the Dawn miletantially and executions	Sugart 1862, he was wounded as follows: from that the Elbore rendering the Refer and Orbitalacky and
made p	March March left Elfon
	the left and outlander
	ensulally unily
	And the second s
Deponent desires to participate in the	
Deponent desires to participate in the benefits of the Act, approved October 24, 1837, 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	Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowages to which I see 1887.
for the year ending October 26, 1891. I have heretofore been allowance to which he is entitled	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
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Sworn to and subscribed before me, this, the) Prod , thu (A)	Dollars for 1891
Sworn to and subscribed before me, this, the mw we Rachaness of day of 2 (1891.)	Swall to and subscribed before me this the
20 Lay of - 27 1891.) Mulk	Sworn to and subscribed before me this the go Mo Richards Mands 1892. Mands
Note - State fully nature of sound on the state of the st	m. L. Leathann 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.	Nors.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.
POWER OF ATTORNEY.	POWER OF ATTORNEY
STATE OF GEORGIA,	STATE OF GEORGIA.
}	STATE OF GEORGIA,
County.)	County.
Know all Men by these Presents, That I,	Know all Men by these Presents, That I,
of County, State of Georgia, do hereby appoint	of
	County, in said State, do hereby appoint
me and in my name, to receive and receipt for whatever amount of money I may be entitled	ot
of the Confederate States (or of this State), as stated in the military service	me and in my name to make the
of the Confedence Control of the military corrige	from the State of Coopers to whatever amount of money I may be entitled to
nor or for any our of market all the cover-	my said attorney to receipt in my same for the long andays: hereby authorizing
nor, 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	or for any sum of money which may be coming to me for that may be issued by the Governor.
nand and seal, this	IN WITNESS WHEREOF, I have hereunto set my hand and seal this
day of	day of
Francisco I a de la companya del companya de la companya del companya de la compa	1092.
Executed in the presence of us:	Executed in the presence of us:
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BERSON (Applicated the control of th	
Send money to me as follows, by	DIRECTION.
	Send money to me as follows, by
County, Georgia.	10
County, Georgia.	P. O.
popularios constituis en april constituis de la constitui	County, Georgia.

For Applicants Heretofore Allowed Pensions, STATE OF GEORGIA.

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	states, and serve	dasa 🚕 🛵	45 6 (1979)	in Company	1, of 3	in Regiment
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	in)	and the second second	arrive Louisian of a	100	7-14/1	4.86
publy, State of Georgia, who, being duly sworn, says on eath that he is a bona lide citizen and sident of said State, and has resided therein continuous. The since the	6. 4	the Sand Contract	Transfer and American	4.0		4.4.

STATE OF GEORGIA, STATE OF GEO

Know all Men by these Presents, T

STATE OFIGEOR	GIA, })	
PERSONALLY appears	K. M. Richa		NY VO
	being duly	ason of	Vuller
County, State of Georgia, who resident of said State, and has	resided therein conti	nuously ever since the	
day of	184 F; that he	enlisted in the milit	ary service of the Con-
federate States (or of the State States, and served as a	200) durir	g the war between the
	male	in Company	, of JE th Regiment
such military service at the bat	unteers Succession of 2 mg	s Brigade	that whilst engaged in
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the acts amendatory thereof, and the year ending October 26, 18	d makes application	for the allowance to	which he is entitled for
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Sworn to and subscribed be	fore me, this, the	On the li	3 . 1
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STATE OF GEORG	IA; } e		
The Committee of the Co	Hinley.		
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do certify that I am well acquain	ted with M	S. Rish	1
-		and about	doc the
applicant in the foregoing affiday	ing:	led that the statemen	ts made by him in his
said affidavit are true, and that h	e is aisaoled, to the es	stent he claims, and	I know he is the in-
dividual he represents himself to			
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poloce Apon the locations, which to	Salamadae made la	ad power of actors	cy, was signed, is a
nom the State of Georgia by re-		of said County, and	the said affidables and
signatures thereto are granine.		e designation money or echanishing the	
Given under my official sign	ature and seal, this	N. CHILL IN G TOTAL ISAN	Sarah 1802
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FUWER OF ALLUKNEY. STATE OF GEORGIA, COUNTY. Know all Men by these Presents. That I. County, State/of Georgia, do hereby appoint____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury releived as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorising my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this...... day of..... Executed in the presence of us DIRECTIONS. Send money to me as follows, by County, Georgia. Soldier's Pension

POWER OF ATTORNEY.

County, State of	of Georgia, do hereby tame, to receive and r a by reason of an injur s State as stated in the	appoint eccipt for w y received e foregoing	batever am	my true	and lawful I may be	attorney in fact, for entitled to from the of the Confederate
	e for the reason aforest NESS WHEREOF, I					
day of		188	15.	Dand and Bear		
Execu	ited in presence of un)			[L. 8.]
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		DIRI	-' ECTIONS			
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(For These Aiready Enrol	ER'S P	.V.Richaráson	Fulton Disabled	30 m	RICHARD JOHNSON, Secretary Executive Department	WARRANT HA

For Applicants Heretofore Allowed Pensions.

	PP-11-0011-00 12-01-0	COLOLO	TITOMOR I) TOTATOTIC:
STATE OF	F GEORGIA,			
fulton	County.			
County, State of and resident of s day of federate States (of States, and serve of Georgia such military ser of Va wounded as follo	or of the State of	y sworn, sa d therein out he enlist Gordo 2nd Man day	ys on oath that he continuously ever ed in the military) during in Company K n 's Brigade; the assas of August 1917 Elbow r	since the service of the Conthe war between the of 38 th Regiment at whilst engaged in in the State
			11 T T	
entitled for the year sworn to and 12th day	ires to participate in the adatory thereof, and make ar ending October 26, 18 do d	es applicate 94. I have ollars, for his, the 1894.	ion for the allower heretofore been the year 189 3	wance to which he is allowed a pension of
STATE OF	GEORGIA, I			
Pulton	County.			
do certify that I as applicant in the fo	Loga lhoun m well acquainted with pregoing affidavit, and am t are true, and I know he s in this County. Given under my of day of March	is the in	W MSR10hard. fied that the states dividual he repre- ature and seal, thi	sents himself to be
/ your	_			4

For Applicants Heretofore Allowed Pensions.

STATE OF	GEORGIA	-			
••	appears W.M.Rich	nty. S	of	Fulton	
day of	Volunteers, eat the battle of	uly sworn, say ded therein co ; that he enli dordon 2nd Mar	son oath the patinuously sted in the residual of the residual	ever since the military servaring the warring the warring the warring the warring that whi	e ice of the Con- r between the th Regiment lst engaged in in the State
of Va wounded as follows	on the	28th day	of	August	186 ² , he was
left arm substan	tially and essen	tially usel	err erbow	rensering	the
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K see a				-	
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miss Local	ubscribed before me f March Lhom O ture of wound or character of m the wound or disease.	, this, the }		Rich	
STATE OF Fulton	GEORGIA, Cour				
do certify that I am	well acquainted wit	h W.M.	Richardso.	Ordinary of :	said County,
applicant in the fore in his said affidavit a	going affidavit, and are true, and I know	am well satisf	ied that the	statements	the nade by him nimself to be
and that he resides i	n this County.				-
9	Given under my day of warch	official sign	ature and se	al, this	340
Affix your real here	9	r.L.L	cal	hm	

		County, 4	
STATE	OE (CEORGIA.	9
	F F 73		W. T.

Dersonally appears.

STATE OF GEORGIA,

County.

Executed in presence of us

A COLUMN TWO				
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727 Th c				

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

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

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3	ion a.	ACT OF 24 OCT., UST.	(For These Aiready Enrelled
Julton	ihardron	ACT OF	(For These /

INVALID	JUDIER S PERSION.	1897.	0

lon				1897
Name M. M. Cichard	Sounty Lullan	Disability	Amount, \$ 150,00	(3)

пвіонь.		1
Commissioner of Pensions.	W.BRANT BANDED TO	O. W. MARRISON, STATE PRINTER, ATLANTA.

RICHARD JOHNSON,

Executed in presence of

[L. S.]

day of___

STATE OF GEORGIA,

POWER OF ATTORNEY.

County.

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

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

I, hereby authorize

STATE OF GEORGIA. Pulton County. W.W.Richardson wulton Dersonally appears. County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 18 ; that he enlisted in the military service of the Confederate States (or of the State of during the war between the States, and served as a private in Company I, of 38 th Regiment of Jeorgia Volunteers, Jordon 's Brigade: that whilst engaged Virginia in such military service in the State of 186 2 he was wounded, injured or diseased as follows: gun shot wound through left elbow rendering the left arm substantiallt 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 pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of county been allowed a pension of dollars, for the year 189 5. Sworn to and subscribed before me, this, the \ Willet Ruchardon 1896. Nove-State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent STATE OF GEORGIA. Pulton County. W.L. Calhoun Ordinary of said County, W.M. Richardson do certify that I am well acquainted with.... applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this 26

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA. Lucton County. personally appears M. M. Cicha dions Pultar 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 1848; that he culisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a fire water in Company, of 38 th Regiment of Seorgea Volunteers, Sizedone 's Brigade; that whilst engaged in such military service in the State of 2aof Cleey- 1862, he was wounded, injured or diseased as follows: Seen that nound through left ellow under we left aim sat Stantially extentially unless. Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a county been allowed an invalid pension of Dollars, for the year 1896. Sworn to and subscribed before me, this, the day of Time Nore—State fully the nature of wound or character of disease which causes the disability, and explain particularly " a extent of the disability, resulting from the wound or disease. STATE OF GEORGIA. Lutton County. 14 1Likelely do certify that I am well acquainted with M. M. Richard of said County. app'icant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I-know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this day of _________1897.

The XII was any

Ordinary County.

POWER OF ATTORNEY.

STATE OF GEORGIA,	
County.	
I,hereby authorize	
. 01	
to receive and receipt for the pension paid hereon and request that he remit seem	e to
by	
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	
day of	
Executed in presence of	s.]
The state of the s	
A Committee of the Comm	

Name IIM Richardler, County Fullow

Disability Berakled ann

RICHARD JOHNSON,

WARRANT HANDED TO

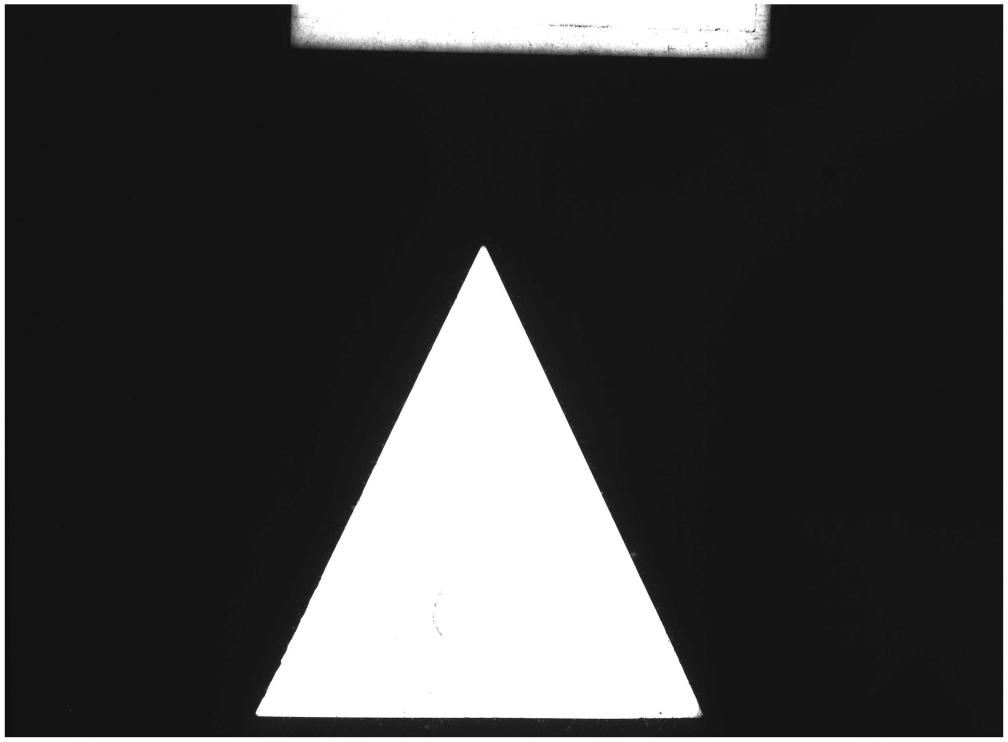
SOLDIER'S PENSION.

1898.

INWALID

(For Those Aiready Enrolled.)

For Applicants Heretofore Allowed	Pensions.
STATE OF GEORGIA,	
	х.
personally appears I. M. Vichards on Fu	ilion
County, State of Georgia, who being duly sworn, says on oath that he	is a bona fide citizen
and resident of said State, and has resided therein continuously ever	since the
18# 1; that he enlisted in the military	service of the Com
States, and served as a fire of in Company	the war between the , of 38th Regiment
Volunteers 7/02 / les la Paines	41 . 1
a such military service in the State of	the alecte
of Ouig. 1862, he was wounded, injured or disease	d as follows:
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and use less	
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affordis.	The second second second second second
d the acts amendatory thereof, and makes application for the pensititled for the year ending October 26th, 1898. I have heretofore u county been allowed at Dollars, for the year 189 Sworm to and subscribed before me, this, the day of The year 1899.	nder said law as a
day of	
17 To Heren	
Note.—State fully the nature of wound or character of disease which causes the disability, and expluded in the wound or disease.	lain particularly the extent
TATE OF GEORGIA,	
Gullan County.	
1, 1/7 July	
	ry of said County,
tertify that I am well acquained with I m Richaus	son the
licant in the foregoing affidavit, and am well satisfied that the statem tis said affidavit are true, and I know he is the individual he represent that he regides in this Own.	ents made by him
that he resides in this County.	ents himself to be
	24+6-
day of	A 7
Affix	
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Ordinary - words	County

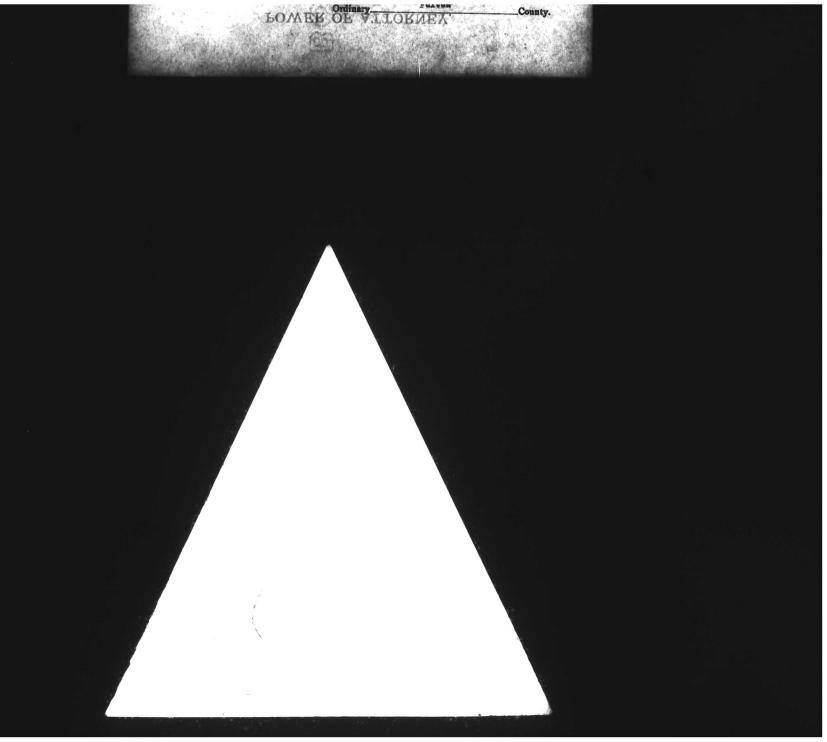


ACT OF SI DOT:, 1807.	1 1	(O) 6	B 1 8	í	
(For Those Already Enrelled.)	Los Los	P N	receive		STATE O
SOLDIER'S PENSION.	executed in	. 0	and receipt		F GEO
1896.	ргезепсе	WHEREOF,	pt for the		GEORGIA,
Name Charles W. Richter	of us	OF, I have	pension	100	4
County Fulton Storage 6 Caplan 4 1895		e hereunto 1896.	paid he	hereby	5
Disability ars Amount, \$ 50		set my	hereon and	y authori	
RICHARD JOHNSON,		hand and	request	ze	
Becretary Bracutive Department.		hand and seal, this	that he r		
WARRANT BAN ED TO		is is	emit sum		
200 -17	•	<u>sa</u>	- 8	. 1	

STORES DE L'ANDRE L'AN

For Applicants Heretofore Allowed Pensions.

Pulton		County.	,	Pulton
County State of	appears	122 - 1		
and resident of s	aid State, an	d has resided there	says on oath that l	he is a bona fide citizen er since the 4t)
day of August	t .	18 58 ; that he en	listed in the milite	ry service of the Con-
federate States (o	r of the State	of) Anni	ng the war between the
States, and server		private	in Company	of 3 th Regimen
of Seorgia	Volunte	ers. Wright		; that whilst engaged
in such military	service in th	e State of Pann	sylvania o	n the 2nd day
	wound in 1	he was wounded, oft hand enteri	injured or diseased	as follows:
of little	finder an	wedge Noll on	-4	Jas Dosadou Dass
stiffeni	g wrist a	nd capuing cool	ning out at base	of thumb-said so
and arm s	ubstantial	Ly and essential	I surinkage of a	rm as to render b
	100		LIJ GSSISSA.	
	La constant			
	Eggs-con-c)			
entitled for the Fulton	year ending	October 26th, 18 y been allowed a pen	lication for the pe 96. I have heretousion of	ofore as a resident of Fifty
dollars, for the year	count	y been allowed a pen	96. I have herete	ofore as a resident of
dollars, for the year	count ar 1895 . subscribed b	y been allowed a pen perfore me, this, the	96. I have herete	ofore as a resident of
dollars, for the year	count ar 1895 . subscribed b	y been allowed a pen perfore me, this, the	96. I have herete	ofore as a resident of
dollars, for the year	count ar 1895 subscribed b	y been allowed a pen pefore me, this, the uary 1896.	96. I have heretousion of	ofore as a resident of
dollars, for the year	count ar 1895 subscribed b	y been allowed a pen pefore me, this, the uary 1896. Occurrence of disease which disease.	96. I have heretousion of	ofore as a resident of Fifty
dollars, for the year	count ar 1895 subscribed by of Febr	y been allowed a pen perfore me, this, the wary 1806.	96. I have heretousion of	ofore as a resident of Fifty
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Sworn to and Aday Norn—State fully the of the disability, recalling	count ar 1895 subscribed b of Febr reture of wound of from the wound of	y been allowed a pen pefore me, this, the uary 1896. Occursor of disease which disease.	96. I have herete ision of	ofore as a resident of Fifty W. R. L. complete particularly the entent intervals of said County,
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Sworn to and Aday Norn—Shate fully the of the disability, resulting STATE OF Fulto I, do certify that I am applicant in the fo n his said affidavi and that he resides	subscribed to f February 1895.	people allowed a pense of the people of the	96. I have heretonion of Charles And the disability, and consorthe disability and consorthe di	esploin particularly the entent interp of said County, the tements made by him presents himself to be
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Sworn to and And Andrew Andrew Sworn to and Andrew Andrew Norm—Shate fully the of the disability, resulting STATE OF Fulto I, Io certify that I am applicant in the fo n his said affidavi and that he resides	subscribed to f February 1895.	people allowed a pense of the people of the	96. I have heretonion of Charles And the disability, and consorthe disability and consorthe di	esploin particularly the entent interp of said County, the tements made by him presents himself to be



POWER OF ATTORNEY.

SOLUTION TO TO THE STATE OF THE			3	to receive	
No. <u>67/</u>		Rxecn	WITM	See 1	
INDIGENT SOLDIER'S PENSION 1905.		cuted in the presence	ess my hand and se	and receipt for the	1
Native A. Richerson County Fulton. Co. Regiment 44 195		of	al, this	e pension allowed	_COUNTY. }
WARRANT ISSUED			day of	, and request	
JOHN W. LINDSEY, Commissioner of Panetons,)			st that h	
WARRANT HANDED TO			1900	e remit sam	hereby and
The parallel marries are subtrained as attacks of		2	S S	6	I

POWER OF ATTORNEY.

STATE OF GEORGIA,	
COUNTY	
I,	hereby authorize
of	
to receive and receipt for the pension allowed, and request that	he remit same to
by.	
by.	
WITNESS my hand and seal, this day of	1905.
Executed in the presence of	[L. S.]

SOLDIER'S PENSION Nome ... F. LIEMENT County Fulton. Co. K. Regiment 446 NARRANT HARDED TO WARRANT HARDED TO WARRANT HARDED TO

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POWER OF ATTORNEY.

STATE OF GEORGIA,	
Ι,	hereby authorize
to receive and receipt for the pension allowed, and request that	he remit same to
byat	
WITNESS my hand and seal, thisday of	
Executed in the presence of	[L. S.]

SOLDIER'S PERSION

SOLDIER'S PERSION

INDIGENT

SOLDIER'S PERSION

I BOOG.

County

County

County

County

WARRANT HANDED TO

WARRANT HANDED TO

ROR APPLICATION FOR THE REPORTER ALECTIC

STATE OF GEORGIA,
First County.
Pearsonally appears 12t. Richerson of Fulton.
the of Georgia, who, being duly sworn gave on act of
and resident of said County and State, and has resided in said State continuously ever
by occupation a 2001 that he enlisted in the military service of the Confederate States (or of the State of
federate States (or of the State of A) during the military service of the Con-
States, and served for the term of 4777 in Company 1, of 45 th Regiment
of Regiment it that his physical condition
follows:
afer por until
The state of the s
that his property consists of the following items:
of the value of_
Dollars. I am now earning.
Dollars
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
county been allowed a pension for the year 1904.
Sworn to and subscribed before me, this the day of JAN 2 1905 1905.
Ordinary.
STATE OF GEORGIA.
Granty, S
In the Market
do certify that I am well acqueints to the first that I am well acqueints the I
the applicant in the foregoing affidavit and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this JA: 1905
day of1906,
A.W. Meren
Ordinary Fulton, County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1905.

State of Georgia, Fulton County. Personally appears L. M. Richerson 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 18 22; that he is 63 years old and 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 45 in Company , of the Regiment ; that his physical condition is as 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 powerty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1908. I have heretofore, as a resident of Fullon County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the J Whickerson State of Georgia, Fulton. 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 JAN day of_

nk spinos muse be illed. s should not be attested before January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,	TY. }	
J. J.		
to receive and receipt for the pension		
у	To company	
WITNESS my hand and seal, this	day of	1907.
Executed in presence of	Company of the Compan	[r., s.]

mojin z DIER'S PENS 1907. WARRANT HANDED TO INDIGENT JOHN W. LINDSEY,

(FOR THOSE ALREADY ENROLLED)

272

Fulton.	}
3/	punty.
Personally appears 1	Nicherson of Thom
County, State of Georgia, who, bein	IP duly aworn seems
the said County and St	ate, and has removed in said State continuously eve
The young	18
and by occupation a Carke	that he enlisted in the miller
federate States (or of the State of) during the t
States, and served for the term of	in Company of 45 th Regimen
of Ho Ooks	; that his physical condition is a
follows:	, that his physical condition is a
Jul Jul	Meara given
that his property consists of the following	Owing items
	Owing items;
of the value of	
	Dollars. I am now earning Dollars per month. That by reason of his
Deponent desires to participate 894, and the Acts amendatory thereo	but the one herein applied for. in the benefits of the Act approved December 15th, and makes application for the according
Deponent desires to participate 894, and the Acts amendatory thereof entitled for the year 1907. I have	but the one herein applied for. in the benefits of the Act approved December 15th, and makes application for the pension to which he
Deponent desires to participate 894, and the Acts amendatory thereo entitled for the year 1907. I have lounty, been allowed a pension for the	but the one herein applied for. in the benefits of the Act approved December 15th, f, and makes application for the pension to which he heretofore, as a resident of
Deponent desires to participate 894, and the Acts amendatory thereof entitled for the year 1907. I have so ounty, been allowed a pension for the Sworn to and subscribed before	but the one herein applied for. in the benefits of the Act approved December 15th, f, and makes application for the pension to which he heretofore, as a resident of the year 1908. me, this the
Deponent desires to participate 894, and the Acts amendatory thereof entitled for the year 1907. I have so ounty, been allowed a pension for the Sworn to and subscribed before	but the one herein applied for. in the benefits of the Act approved December 15th, f, and makes application for the pension to which he heretofore, as a resident of the year 1908. me, this the
Deponent desires to participate 894, and the Acts amendatory thereof entitled for the year 1907. I have sounty, been allowed a pension for the Sworn to and subscribed before day of JAN Zalana R. Willinson.	that the one herein applied for. In the benefits of the Act approved December 15th, If, and makes application for the pension to which he heretofore, as a resident of
Deponent desires to participate 894, and the Acts amendatory thereof entitled for the year 1907. I have sounty, been allowed a pension for the Sworn to and subscribed before day of JAN Zalana R. Willinson.	but the one herein applied for. in the benefits of the Act approved December 15th, f, and makes application for the pension to which he heretofore, as a resident of the year 1908. me, this the
Deponent desires to participate 894, and the Acts amendatory thereon entitled for the year 1907. I have sounty, been allowed a pension for the Sworn to and subscribed before day of Jan 2 July 28 Williamson.	but the one herein applied for. in the benefits of the Act approved December 15th, if, and makes application for the pension to which he heretofore, as a resident of the year 1908. The year 1908. The provided in the pension of the pension to which he theretofore, as a resident of the pension of the pension to which he theretofore, as a resident of the pension of the pension of the pension to which he theretofore, as a resident of the pension of the pension of the pension to which he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to whic
Deponent desires to participate 894, and the Acts amendatory thereon entitled for the year 1907. I have sounty, been allowed a pension for the Sworn to and subscribed before day of Jan 2 July 28 Williamson.	but the one herein applied for. in the benefits of the Act approved December 15th, if, and makes application for the pension to which he heretofore, as a resident of the year 1908. The year 1908. The provided in the pension of the pension to which he theretofore, as a resident of the pension of the pension to which he theretofore, as a resident of the pension of the pension of the pension to which he theretofore, as a resident of the pension of the pension of the pension to which he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to which he he theretofore, as a resident of the pension to whic
Deponent desires to participate 894, and the Acts amendatory thereon entitled for the year 1907. I have sounty, been allowed a pension for the Sworn to and subscribed before day of Jahr. The Williamson. State of Georgia, Jahr. R. Williamson.	anable to support himself by his own exertion or but the one herein applied for. In the benefits of the Act approved December 15th, and makes application for the pension to which he heretofore, as a resident of the year 1908. The year 1908. The year 1907. Ordinary. Ordinary of said County.
Deponent desires to participate 894, and the Acts amendatory thereon entitled for the year 1907. I have so ounty, been allowed a pension for the Sworn to and subscribed before day of Jahr. The Williamson. State of Georgia, Jahr. R. Williamson. Cartify that I am well acquainted well	anable to support himself by his own exertion or but the one herein applied for. in the benefits of the Act approved December 15th, and makes application for the pension to which he heretofore, as a resident of the year 1908. me, this the T.W. Ricker and the pension of the pension of the pension to which he heretofore, as a resident of the year 1908. The pension of the pension to which he heretofore, as a resident of the pension to which he heretofo
Deponent desires to participate 894, and the Acts amendatory thereos entitled for the year 1907. I have ounty, been allowed a pension for th Sworn to and subscribed before day of Jahr R. Williamson. State of Georgia, Fullon. John R. Wilkin Certify that I am well acquainted we applicant in the foregoing affidavit,	anable to support himself by his own exertion or but the one herein applied for. In the benefits of the Act approved December 15th, and makes application for the pension to which he heretofore, as a resident of the year 1908. The year 1908. The Wicker of the Act approved December 15th, and makes application for the pension to which he heretofore, as a resident of the year 1908. The Wicker of the Act approved December 15th, and the heretofore, as a resident of the year 1908. The year 1908. Ordinary. Ordinary of said County, with the Act of the year 1908. Ordinary of said County, and am well satisfied that the great said the year 1908.
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Deponent desires to participate 894, and the Acts amendatory thereos entitled for the year 1907. I have to ounty, been allowed a pension for the Sworn to and subscribed before day of An Articles of Georgia, It. John R. Wilkinson. State of Georgia, Wilkinson. Certify that I am well acquainted we applicant in the foregoing affidavit, him in his said affidavit are true, and be, and that he resides in this County.	anable to support himself by his own exertion or but the one herein applied for. In the benefits of the Act approved December 15th, If, and makes application for the pension to which he heretofore, as a resident of
Deponent desires to participate 894, and the Acts amendatory thereo. I have a centitled for the year 1907. I have a county, been allowed a pension for the Sworn to and subscribed before day of AN Williamson. State of Georgia, Light R. Williamson. Certify that I am well acquainted we applicant in the foregoing affidavit, him in his said affidavit are true, and be, and that he resides in this County Given under my official	anable to support himself by his own exertion or but the one herein applied for. In the benefits of the Act approved December 15th, If, and makes application for the pension to which he heretofore, as a resident of
Deponent desires to participate 894, and the Acts amendatory thereo. entitled for the year 1907. I have to county, been allowed a pension for the Sworn to and subscribed before day of AN Williamson. State of Georgia, Light R. Williamson. Certify that I am well acquainted we applicant in the foregoing affidavit, him in his said affidavit are true, and be, and that he resides in this County Given under my official	nuable to support himself by his own exertion or but the one herein applied for. In the benefits of the Act approved December 15th, if, and makes application for the pension to which he heretofore, as a resident of
Deponent desires to participate 894, and the Acts amendatory thereo. I have 1 sounty, been allowed a pension for the Sworn to and subscribed before day of AN Williamson. State of Georgia, Line R. Williamson. Certify that I am well acquainted we applicant in the foregoing effidavit, him in his said affidavit are true, and be, and that he resides in this County.	anable to support himself by his own exertion or but the one herein applied for. In the benefits of the Act approved December 15th, if, and makes application for the pension to which he heretofore, as a resident of

Richerson, Thos. W Fulton Co. 1929

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness or funeral)

Thos H. Jeffues Ordinar

of Fullow County

mail Lang 14 -1923 100

1924

Commissioner 192

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 flight with them. Do not keep this application in your office.

Index Printing Co., Atlanta, Ga

Pard

ATIANTA GA Oct. 15 1923.

MFer funeral expenses of Mr. Thomas W.Rickerson.

TO HARRY G. POOLE, DR.

"FUNERAL HOME"

PHONES MAIN 0780

PRIVATE AMBULANCE

Jan. 20 1923.

Casket & Box. Embalming & Services.

Robe. Hearse \$ 80.00 15.00 20.00 5.00

\$ 120.00

Georgia Fulton County.

Personally appeared before me Harry G.Pocle who after being sworn says that the above account was rendered for funeral expenses of Mr. Thomas W.Rickerson who died

without wining sufficient property to pay this bill.

Amounto Automorphish before Harry G. Ovolo

Prote & Davies Co. Bullians Address

Georgia, Pendding County.

I, the undersigned do certify that I W. Rickers are now of the

County Frultan

is the same person who as Andrigue

reson has been admited on the analysis pensioner as on the pension rolls of this country, and down a pension of dollars

for 190_, and the bearer is same Devsan so admitted on to

Given under my hand and official seal of office Dec 12th 19

7. A. lehiles [L. 8.

[SEAL]

(Chical sus was at welling to The

To Be Paid to the Ordinary for Funeral Expenses and Expenses of Last Illne GRORGIA Fullon Personally before me, the Ordinary of said County, comes of said County, who, after being sworn, on oath says Thoo W. Ruckleson of said County, and that said pensioner Fullon County at the 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 al 200 per sworn statement fully and completely itemized, hereto attached. Sworn to and subscribed before me Althur R. market Ordinary. Fulton AFFIDAVIT OF ORDINARY GEORGIA Fulkou County Thoo Hallnes ...Ordinary of said County, do certify citizen of said County, and that said person is of a truthful and trustworthy character, entitled to full faith and credit. The W. Richerson while in life and that this was the same person whose name appears on the tuelonCounty, and was paid a Pension One Hundies Dollars in said County for 192 2 and I now believe said pensioner to be dead. Given under my hand and official seal, this.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Carte Conte			
POR THOSE ALREADY SHOOLED		(N)	by 100
No. / 3 /		Witness	e and
INDIGENT SOLDIER'S PENSION 1905.		my hand and seal, in the presence of	I,
Same E. L. Richette Jounty Fulton.		eal, this	
O. Regiment //		day of	nt nowed, and
JOHN W. LINDSEY,			and request that
Commissioner of Pensions, WARRANT HANDED TO	•		hereby he remit
HE PRANTIN PRINTING AND AND AND AND THE PARTY OF		1905. [t. s.]	authorize same to

no date

POWER OF ATTORNEY.

STATE OF GEORGIA, County.	
I,	hereby authorize
of	
to receive and receipt for the pension allowed, and r	equest that he remit same to
at	
by .	
WITNESS my hand and seal, this day of	1905.
	[L. s.]
Executed in the presence of	

INDIGENT SOLDIER'S PENSION INDIGENT SOLDIER'S PENSION ISOCOUTY FULLON. Co. C. Regiment Co. C. Regiment WARRANT ISSUED WARRANT HANDED TO UNARRANT HANDED TO UNARRAN

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
by	
WITNESS my hand and seal, thisday of	
Executed in the presence of	[L. S.]

SOLDIER'S PERSION No. 44 No. 44 INDIGENT SOLDIER'S PERSION 1906. LOCOUNTY LILLON. Co. L. Regiment Let WAREANT ESSUED JOHN W. LINDSEY. Commissions of Pension. WAREANT HANDED TO	Tof France or Persons I and Publishing Co., Go. W. Horsepor, 1984.
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SHOPSING GRAND DEFINED BUT STAYDING A VALUE OF A NOT A PARTIES OF A PA

LOB VERLICYALZ HERRICAGE VITUALED BEFRING

STATE OF GEO	RGIA,
T3 44	County.
Pearsonally appears	L. Richette 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 a	nd State, and has resided in said State continuously ever
since the day of_	18; that he isyears old and
by occupation a	that he enlisted in the military service of the Cou-
federate States (or of the State	of) during the war between the
States, and served for the term	ofin Company, of // th Regiment
of Ja. Cavabuy	in Company, of // th Regiment
follows:	; that his physical condition is as
	Man to the second of the secon
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that his property consists of the	e following items:
No.	, temp
of the value of	Dollars. I am now earning
by my labor,	Dollars per month (73)
i s sendicion and poverty i	ue is unable to support himself L. L!
, and the receives no pe	usion but the one herein applied for
Deponent desires to parti	cipate in the benefits of the Act approved December 15.1
, and the rects amendatory t	mereci, and makes application for the sension to milet
is entitled for the year 1800. I	have heretofore as a resident of
County been allowed a pension f	or the year 1904.
Sworn to and subscribed	before me, this the E. L. + Respects
day of JAN	1905. \ E. Z. + Clabells
1.000	union Ordinary. Mark
STATE OF STATE	•
STATE OF GEORG	`
	Sounty.
-/-	Ordinary of said County,
do certify that am well acquain	ted with Q. J. See As of The
the applicant in the foregoing a	fidavit and am well satisfied that the statements made
by him in his said amdavit are tr	ue, and I know he is the individual he represents himself
to be, and that he resides in this	
day of	ometal signature and seal, this
	1905.
Affix }	John Alber Risason
horo }	Ordinary Fulton, County

Norn.—The blank spaces must be filled

Nove.—Affidavit should not be attested before

State of Georgia, Fulton County. Personally appears L. L. Richetts 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 1847; that he is 8 years old and by occupation a base cula, that he enlisted in the military service of the Confederate States (or of the State of Georgica during the war between the States, and served for the term of Lyeans in Company 6, of the Regiment Georgia Dolumbeers Con, that his physical condition is as follows: De werd Jiven age and that his property consists of the following items: no furtherly 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 E. Lin Richells for A Wil Kenson State of Georgia, Fulton County. Willer 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 JAN 1 day of Fulton. County. Ordinary_ Nova.—The blank spaces must be filled. Nova.—Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,	COUNTY.	
I,	The control of the second seco	, hereby authorize
	of	
to receive and receipt for the	pensionrallowelly sail, request the	t horremittamentou x
by	Managama and the service our ordinals	
WITNESS my hand and seal	, thisday of	1907.
		[L. S.]
Executed in presence of	t	

SOLDIRR'S PRISION

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Beis m. VIII .

State of Formale.

FOR APPLICANTS LERETOPORE ALLOWED PERSIONS

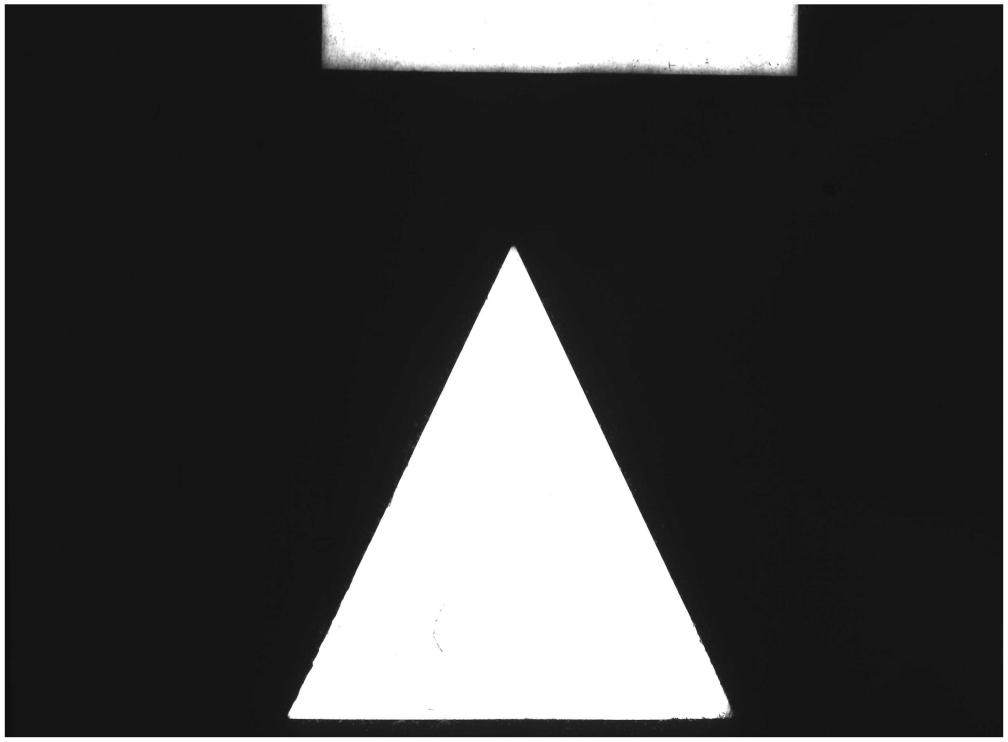
	Georgia,	1000	of Coe	Annual Control of the
Fulfor	County	Ko /		
Personally	appears O. Z. A	icketts	of	on Hon.
County, State of (Georgia, who, being duly	sworn, says on oa	th that he is a	bona fide citizes
and resident of sai	id County and State, an	d has resided in	said State con	tipuously eve
since the	day of	18 × 3;	that he is 6	3 years old
and by occupation	8			
federate States (or	of the State of	12	_) during the v	var between the
States, and served	for the term of 2-4	in Compan	y C of	th Regimen
of OC	all son			condition is a
follows :			1-3	;
2	Xly	abili	ta	1
r.	140	search se	iid.	7.
that his property of	consists of the following	items:	C	
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by my labor		Della		
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is entitled for the	amendatory thereof, and year 1907. I have heret wed a pension for the ye	ofore, as a reside	-	
•	d subscribed before me,	this the	Dhis 1851	Ties
John .	K. Wilkinson	Ordinary.	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-
	Tr MIC.	,	1	
State of	R. Wilkimson Georgia,	Ordinary.	(, , , , , ,)	
State of	Georgia,	Ordinary.	1	- 1 . - 1 .
State of	R. Wilkimson Georgia,	Ordinary.	Ordinary	
State of Pulton.	Georgia, County	Ordinary.	Ordinary Richett	·
State of Tulton. I do certify that I as	Georgia,	Ordinary.	rickett	of said County
State of Tulton. I, do certify that I as the applicant in the	Georgia, County	Ordinary.	Lickett	of said County
State of Tulton. I, do certify that I as the applicant in the by him in his said to be, and that he	Georgia, County Williams m well acquainted with e foregoing affidavit; an affidavit are true, and I	Ordinary.	d that the standard dividual he reg	of said County
State of Tulton. I, do certify that I as the applicant in the by him in his said to be, and that he	Georgia, County County Million m well acquainted with e foregoing affidavit; and affidavit are true, and I resides in this County. ven under my official sig	Ordinary.	d that the standard dividual he reg	of said County
State of I, J. do certify that I as the applicant in the by him in his said to be, and that he so Gir	Georgia, County Williams m well acquainted with e foregoing affidavit; an affidavit are true, and I resides in this County.	Ordinary.	Cickett d that the st dividual he rep	of said County
State of I, J. do certify that I as the applicant in the by him in his said to be, and that he so Gir	Georgia, County County Million m well acquainted with e foregoing affidavit; and affidavit are true, and I resides in this County. ven under my official sig	Ordinary.	d that the standard dividual he reg	of said County
State of I,	Georgia, County County Million m well acquainted with e foregoing affidavit; and affidavit are true, and I resides in this County. ven under my official sig	Ordinary.	CERETA d that the st dividual he rep	of said County

GEORGIA, HALL COUNTY.

I Certify, That H.L.Ri oketts the helder of this certificate was an Indigent Pensioner, and paid the sum of Sixty Bollars from this County, in ISOM and that he new resides in Bulton Quanty.

Witness my hand and official Signature, this Dep. 5, 1804.

OPERANCY.



In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand payments provided, the following suggestions are submitted:

I. If an applicant has been wounded, the description of the wound should be carefully set dissolidy. It applicant has been wounded, the description of the wound should be carefully set dissolidy. It applicant claims disability from disease contracted in the service, a tull and carefully stated 2. The law makes no allowance for an arm or leg, unless the arm or leg at lat and exercise stated by select.

2. The law makes no allowance for an arm or leg, unless the arm or leg but the formally stated the seedably selects.

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." purposes be "substantially and essentially selects.

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." purposes be "substantially and essentially selects."

4. It the application is for a wounded leg, it would seem to be a fair construction of the Act, and the purposes be "substantially and essentially useless."

5. If payers are returned for orrection, and amendments are added to any of the affidavits, the amendments are added to any data under soft before an officer, and the proofs must show that the amendments have be under soft before an officer, and the proofs must show that the amendments have be certificate of any other will not be received in any case.

The Colinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

APPLICATION FOR ALLOWANGE. General Derabelete Applicans Josephus Meden County Feellen Amount 50 Date of Warrant Ho SECRETARY EXECUTIVE DEPARTMENT.

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. It 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, It applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

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."

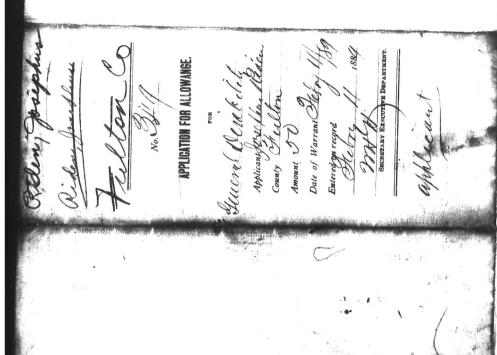
4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick,

that the leg is not "substantially and essentially useless."

5. It papers are returned for correction, and amendments are added to any of the affidavits, the amendmeets must be made under outh before an officergand the proofs must show that the amendments have

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.



Approants who mave not neretolore Drawn.

STATE OF GEORGIA, Fullow County. PERSONALLY appears Josephus Killer of 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 ; that he enlisted in the military service of the Confederate States (or of the State of. georges) during the war between the States, and served as a in Company D, of 3 1 th Regiment Georgia Volunteers Countying 's Brigade; that whilst engaged in such military service, at the battle of Llorgea, on the

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 thereunder for the year ending October 26, 1889.

Sworn to and subscribed before me, this the

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA, Fullow County.

Personally came before me John Willendon 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 Josephan Kidin, 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

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 affidatit; 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,

Personally comes before me W. L. (a how Ordinary of said county, the Morach M) Dand When Abram Love that known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined for how Rider and after such examination say that the applicant has been injured as follows: here I shall in the a ccipital to the formula bornes sommal places of your corner out. Her which is made to form amountly desirabling him by hereder one two about the said time to here form or daring laborations in making the prosential of the formula to the formula of the daring laboration and the said to the formula of the daring laboration and the said to the formula of the daring laboration and the said to the formula of the daring laboration and the said to the sai

Sworn to and subscribed before me, this day of February 1889 Willbrain Love, ms,

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.

I, W.L. County.

Ordinary of said county,

do certify that I am well acquainted with Josephus Receles the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in 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 B. M. U.S. Dlimin before whom the foregoing affidavits were made and power of attorney was signed, is a Orlay Dathie of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this day of Filming 1889

Ordinary Factor 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

Executed in the presence of us:

(L. S.)

Frellow County.

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

I further certify that whom the foregoing affidavits were made and power of attorney was signed, is a of said county, and the said affidavits and

signatures thereto are genuine.

Given under my official signature and seal, this 7 day of Helinny 189 10

mx locuson

Ordinary Ferriton

County.

County, Georgia. STATE OF GEORGIA. Freen do certify that I am well acquainted with applicant in the foregoing affidavit, and am well satisfied that the 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 7 by of 7 1891. Ordinary Fuel County.

For Applicants Heretofore Allowed Pensions.

County, Georgia.

County, Georgia.

STATE OF GEORGIA. go un Hallow County. do certify that I am well acquainted with...... applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is clearled, to the accent he dains, and I know he is the individual he repesents himself to be, and that he resides in this county. Given under my official signature and seal, this 3 day of the control 189 a. Ork Could mandCounty.

Applicants Heretofore Allowed Pensions.

Ь.	STATE OF GEORGIA.
	Halton County
	PERSONALLY appears Traphase (12 den)
	ofCounty, State of Georgia, who, being duly aworn, says
	on oath that he is a some field citizen and resident of Georgia, and has been such continuously
	that he enlieted
	in the military service of the Confederate States (or of the State of
193	during the war between the States, and served as a common in Company &
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14	Brigade , that whilst engaged in such military service at the battle of
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	186% he was wounded as follows: Shall
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	Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and
	the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year enting October 26, 1892. I have heretofore been allowed a pension of
	the year ending October 26, 1892. I have heretofore been allowed a pension of
	Dollars for 1871
	Swern to and subscribed before me this the \ Mosephus Ride 11
	3 day of elle 1802.
	GO Colhonn Ordinary
	Norm.—State fully nature of wound or character of disease, which causes the disability, and explain particularly the extent of the disability.
	Norz.—State fully nature of wound or character of disease, which causes the disability, and explain particularly the extent of the disability. POWER OF ATTORDEY.
	Norz. State fully nature of wound or character of disease, which causes the disability, and explain particularly the extent of the disability.
	Norz.—State fully nature of wound or character of disease, which causes the disability, and explain particularly the extent of the disability. POWER OF ATTORNEY.
	Nove-State fully nature of wound or character of disease which causes the disability, and explain particularly the POWER OF ATTORDEY. STATE OF GEORGIA, County.
	Norz.—State fully nature of wound or character of disease, which causes the disability, and explain particularly the POWER OF ATTORDEY. STATE OF GEORGIA.
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rd.	Nove-State fully nature of wound or character of disease, which causes the disability, and explain particularly the POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I,
ed .	Norm.—State fully nature of wound or character of disease, which causes the disability, and explain particularly the POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of. County, in said State, do hereby appoint.
	Nove-State fully nature of wound or character of disease which causes the disability, and explain particularly the POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint of my true and lawful attorney in fact, for
	Nors.—State fully nature of wound or character of disease which causes the disability, and explain particularly the POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint of my true and lawful attorney in fact, for
	Nors.—State fully nature of wound or character of disease which causes the disability, and explain particularly the POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint of my true and lawful attorney in fact, for
	Norn-State fully nature of wound or character of disease which causes the disability, and explain particularly the Extent of the disability. STATE OF GEORGIA, County. Enow 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 and the said with the state of the confederate states (or of this State), as stated in the foregoing affidavit; hereby authorizing
	Norn.—State fully nature of wound or character of disease which causes the disability, and explain particularly the Extent of the disability. FOWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint of me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the 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 pame 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.
	Norn.—State fully nature of wound or character of disease which causes the disability, and explain particularly the Extent of the disability. FOWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint of me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the 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 pame 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.
	Nove-State fully nature of wound or character of disease which causes the disability, and explain particularly the STATE OF GEORGIA, STATE OF GEORGIA, County. Enow 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 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 hereumto set my hand and seal this day of
	Norna-State fully nature of wound or character of disease which causes the disability, and explain particularly the states of the disability. STATE OF GEORGIA, County. Enow all Men by these Presents, That I, of County, in said State, do hereby appoint ot me and in my name, to receive and receipt for whatever amount of money I may be entitled to the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, 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.
	Norm.—State fully nature of wound or character of disease which causes the disability, and explain particularly the POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint of 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 the present of the pre
	Norm.—State fully nature of wound or character of disease which causes the disability, and explain particularly the POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint of 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 the present of the pre
	Normalists fully nature of wound or character of disease which causes the disability, and explain particularly the STATE OF GEORGIA, 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 hereumpo set my hand and seal this day of 1892 Executed in the presence of us:
	Norm.—State fully nature of wound or character of disease which causes the disability, and explain particularly the particular that the
	Norna-State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. STATE OF GEORGIA. County. STATE OF GEORGIA. County. Enow 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: Executed in the presence of us: 1893 Executed in the presence of us:
	Norna-State fully nature of wound or character of disease which causes the disability, and explain particularly the Extent of the disability. FOWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint of me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the 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 1892 Executed in the presence of us:
	Normality. STATE OF GEORGIA. County. Enow all Men by these Presents, That I. County, in said State, do hereby appoint of my true and lawful attorney in fact, for my true and lawful attorney in fact, for from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of Executed in the presence of us
	Normalists fully nature of wound or character of disease which causes the disability, and explain particularly the street 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 fine 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 Executed in the presence of us Executed in the presence of us Executed in the presence of us

Accella. 1891. Maimed Soldiers. Voncher No. 189 Paid to for seple Rider How Derability from Hull sound Included in warrant No. issued to Treasurer, 1891. WARRANT-CLERK.

applicant

Maimed Soldiers. Voucher No. 469 Amount \$ 50 Paid Josephus Riden For Desables by Mall much Stely 7 Included in warrant No. issued to Treasurer. WARRANT CLERK. applicant

Tulton Maimed Soldiers. Voucher No. 349 Amount. 8 00 . Paid 10 Jasepher Rider For Secural Derability from Head rome. Included in Warrant No. issued to Treasurer.

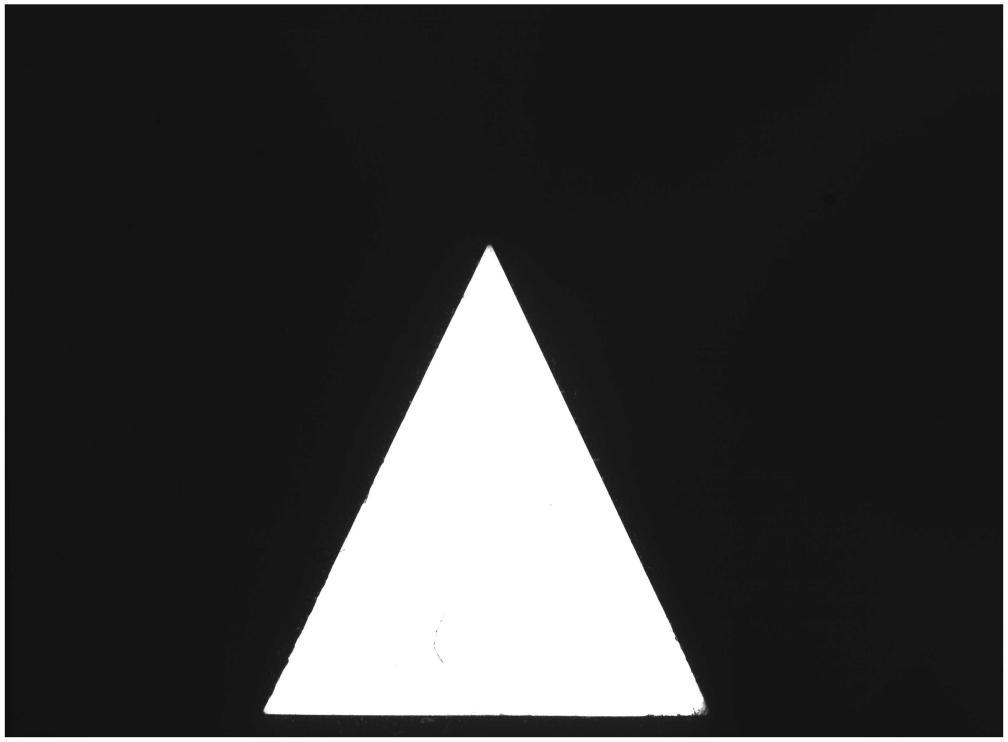
applicant

Atlanta, Ba. Fleby 7 1891. EXECUTIVE DEPARTMENT. Mr. Josephus Peden of the County Bullin 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 bego-examined and allowed for The Treasurer will pay the same and here his receipt on this voucher and return same to Executive Department for warrant. 50 RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

STATE OF GEORGIA,

No. 469 Allanta, Jan. Febry STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Mr. Josephus Riden 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 Disabled by skell morre He is entitled to receive the sam of Dollars for such disability, the same being the allowards due for the year ending October 24, 1890 The Treasurer will pay the same and bold his receipt on this voucher, and return same to Executive Department for warrant. GOVERNOR. By the Governor, 4. Stamson CLERK EXECUTIVE DEPARTMENT. RECEIVED OF STATE TREASURER, R. U. HARDEMAN, per above voucher, this

	No. 340
STATE OF GEORGIA, EXECUTIVE DIPARTMENT	Manta, Ga Febry 11 1809
4	
Mr. Josepher	Meden of the County
ot gullus	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
He is entitled to receive the sum of	
The Treasurer will pay the sam	allowing due for the year ending October 24, 1889.
Executive Department for warrant.	Mordon
	Governor.
By the Governor Hams	
	CLERK EXECUTIVE DEPARTMENT.
/	The state of the s
X	102
50-	
RECEIVED OF STATE TREASURER,	R. U. HARDEMAN,
dille you	
	Dollars,
per shove voucher, this	of Jeffy 1880.
4	Hasephio Rider
	AND THE RESERVE AND THE RESERV



POWER OF ATTORNEY

WIDOWS Indigent Pension	attack of musband stands to musband stands to musband stands of musband stands of the	Sue J. F. Han	Witness my hand this Executed in pressure (max.)	STATE OF GEORG
Name addition of the state of t			— day ofby his checker ofby his checker of	County.
Conon			th or registered mail.	for the panaion allowed and the

ALLENDO A COMPANY

STATE OF GEORGIA,	The de aux Assamble Marie Contraction
Hillan County,	27. How was the supported for 1800 and 1900? By the deminaring Carp.
Murtin & Ridling, of said State and County, baving	Control of the second of the s
been presented as a witness in support of the Application of Mrs. Mars. Care Ridling	28. How much did applicant contribute to her support for last two years ?
for a Pension under the Act of Oct 1900, and after having been duly sworn true answers to make to the	29. Give a full and complete statement of applicant's physical condition?
1. What is your name and where do you reside? Mustin & Riskling	80. What interest have you in the recovery of this pension by the applicant?
Hullan County 21	Copil 19
2. Are you acquainted with the applicant, Mrs. Mary Gane Ridling	Sworn to and subscribed before me this
If so, how long have you known her? 40 years or more	day of July 1906) St. Rilling
3. Where does she reside, and how long and since when has she been a resident of this class? Thanku has - Simulan has all him him.	John Revelling Oramary
4. When and where was she born! May - 1844	.000
6. Were you ever acquainted with her husband?	Witnesses.
the Whore did be madde in 1881? De Hille Cod Cod -	
7. When and to whom was he married? Mary Jame Pursuell-in My 1864 8. When and where was he born? In 1840- Dec 24=	Affidavits of Physicians.
8. When and where was he hour? 924 13-40-245	Anidatio of Hydicialis.
9. How long have you known him? All my life- Since I Can remember	STATE OF GEORGIA,
10 When and where did Head to Buellianh quite in the way between	Hullon County,
10. When and where did Hers to Reelling enlist in the war between the States, and in what Company and Regiment did he enlist and bow do you know this? 3 there 1861.	Personally before me comes WP Vinter and
Leo A- 38- the Segiment. I was with him	both brown to us to be used.
11. Were you a member of the same Company and Regiment? I was	physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs.
	Many fame Milling applicant for Pension under Act of 1900, and after
13 How long did he perform regular military duty? To end of war theeft	such personal examination say that her physical condition is this Listance Continue
when in hospillal and at fram on Hurlaugh	Offermalism: Hearly enland Jeneral
13. When and where was his Company and Regiment surrendered and discharged from service?	Sulla Stand flind his lift eye horas
St Sphamatax - So I am informed	Note that the sale a supplied
14. Were you with the command when it surrendered? I was must an ellerity 15. Was Martin & Rudling the husband of applicant present;	and we have no interest in said pension if allowed.
15. Was reactive to the husband of applicant present?	Bworn to and subscribed before me this 1990
He was not the was at home on furlingh	day of Merch 190/ It Dinson m.D.
16. If not present, where was he? Thomas on honorable - Juntough	John Revelling or ordinary.
17. When and where did he leave his Command? Dant remember— For what cause? Belance of Humburgh-from Cronic Descrity By whose authority he left?	
For what cause?	Fullar County.
By whose authority he last additional authority and additional authority additional authority additional authority and additional authority additional authority additional authority additional authority and additional authority additional authority additional authority and additional authority additional authority and additional authority and additional authority additional authority and additional authority additional authority additional authority and additional authority additional au	
How do you know at this (State fully and clearly,) - 1000 a arregular of Squal	ORDINARY'S CERTIFICATE.
him the the year	STATE OF GEORGIA,
18 When and whose did the hand to Realistic stop	Fully County.
19. Where did he reside at his death and how long had he been a resident of Goorgia at his death?	
19. Where did he reside at his death and how long had he been a resident of Ggorgia at his death?	I, John Welling, Ordinary in and for said county, hereby
Al resiliain Hullan loom All his life	certify that the applicant, Mrs. 711 9 Publing resides in said
20. Do you of your own knowledge know that applicant is the lawful widow of Shoo le Rellevie	county, and has been a bona fide resident of this State sinceday of
y eus	18 14 4 and that the vitnesse, Mr. 70 V Red ling
21. Has she remained unmarried since her soldier husband's death, and is now his widow?	are of trustworthy character, and that their statements
	I do further earlier that the core amounting the freegoing questions, the applicant and said witnesses took the coath home possershed, and the full text of the affidavits was read to the applicant and witnesses before the same long signest and subcorded.
22. What property, effects or income has the applicant, if any, and how do you know this of your	eath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same
own knowledge? Wart	I further certify that the tax digest of Tuller outly shows that applicant
	returned for unation in her own name in 1899
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she	of property, and in 1900
make of it? Name	Witness my hand said official smal this day of Fire 190 /
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to	0000
whom? Has need.	SEAT!
	Jaller County.
25 What to sail a second state of the second state of the second	Horns-L. Before any questions are answered, the Colinary shall areas applicant and the witnesses in the following
25. What is applies to rays and condition and her changes and ability to earn a support?	and the evidence you shall give will be the whole truth; in help zen God,"
Titally the truna lillion	
A CONTROL OF THE PROPERTY OF T	6. Only visious who were the wives of the dead husbands wills they were coldiers need apply—and are now

FUWER OF ATTORNEY.

STATE OF GEORGIA,	· .
Mr Many Relling	1. Jac /
ya Malony Sidling of Adding to receive and receipt for the penalon paid barrow and receipt to the penalon paid barrow and receipt to	heraby authorise
	he remit same to
me by hund st Cettante	ye
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of	22 nol
Mary & Wedle	[L. 8.]
Escuted in presence of	1
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O'lleve Colfa	

TO THOSE HENETOPORE PAD.

TO THOSE HENETOPORE PAD.

INO. 10 3.

INDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

THE WILLIAM COUNTY.

WARRANT ISSUED

SOHN W. LINDSEY.

CO. M. 25 - F. C. Regiment

JOHN W. LINDSEY.

CO. M. 25 - F. C. Regiment

SOHN W. LINDSEY.

CO. M. 25 - F. C. Regiment

JOHN W. LINDSEY.

CO. M. 25 - F. C. Regiment

AND HANDED TO

S. M. MARRANT ISSUED

WARRANT ISSUED

OF WARRANT ISSUED

TATE OF CHOREIA

THE RECTURA CONTRACTOR

FOR INDICERA WIDOWS HERETOPORE ALLOWED PENSIONS

STATE OF GEORGIA, PERSONALLY COMMENT MINE
County of Little \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
who, being sworn, says on oath, that she is a bona fige resident of said County of
State of Georgia, and that she has RESIDED in said State
That she is the Widow of
3 of the Regiment of Regiment of
Volunteers, that he enlisted in said regiment oner about the month of
186 , and served in the Army up to
on the 2712 day of Acces 1800
- Composition
The state of the s
Deponent swears that sho was the
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
2
County, under Act 1900, for the year 1908, and now apply for the pension provided by law for the
year ending December 31, 1908.
Sworn to and subscribed before me,
this 2) 2 glay of Accessary 1908. Allely Malley
Much Melhium Ordinary. Post Office Mark
State of Georgia, John Allican
-hilton
County Ordinary of said County, certify that I am well
equainted with Mrs. Mary Midling , who made the above affidavit and
an satisfied that the facts therein stated are true, and I know she is the individual she represents
erself to be, and that she has continuously resided in this State since the
ay of
Given under my official signature and seal, this the 2 2 Moday of 1908
Comeias Chulling Commission
Book!
NOTE All blooks must be died

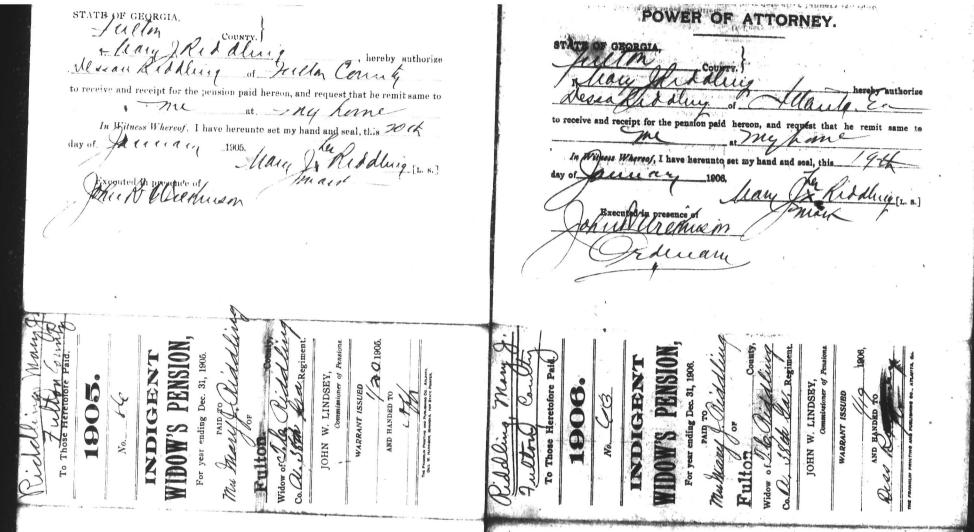
FUR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS. STATE OF GEORGIA, PERSONALLY COMES MRS County of Fulton who, being sworn, says on oath that she is a bone fide resident of said County of _State of Georgia, and that she has RESIDED in said State Volunteers, that he enlisted in said regiment on or about the month of and served in the Army up to suntiled 186 Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 I have been allowed an Indigent pension as a resident of Fulton. County, under Act 1900, for the year 1908, and now apply for the pension provided by law for the year ending December 81, 1904. Sworn to and subscribed before me, and subscribed before me,

_day of DAN 22 isu4 1904.

| Post Off. | Post Off. | Market State of Georgia, I. John R. Wilkinson. F1111011. County. [Ordinary of said County, certify that I am well acquainted with Mrs Plans ___, 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 _1843

Vouchers and Affidavits must bear date after January 1st, 1904.



NOTE. All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 1905.

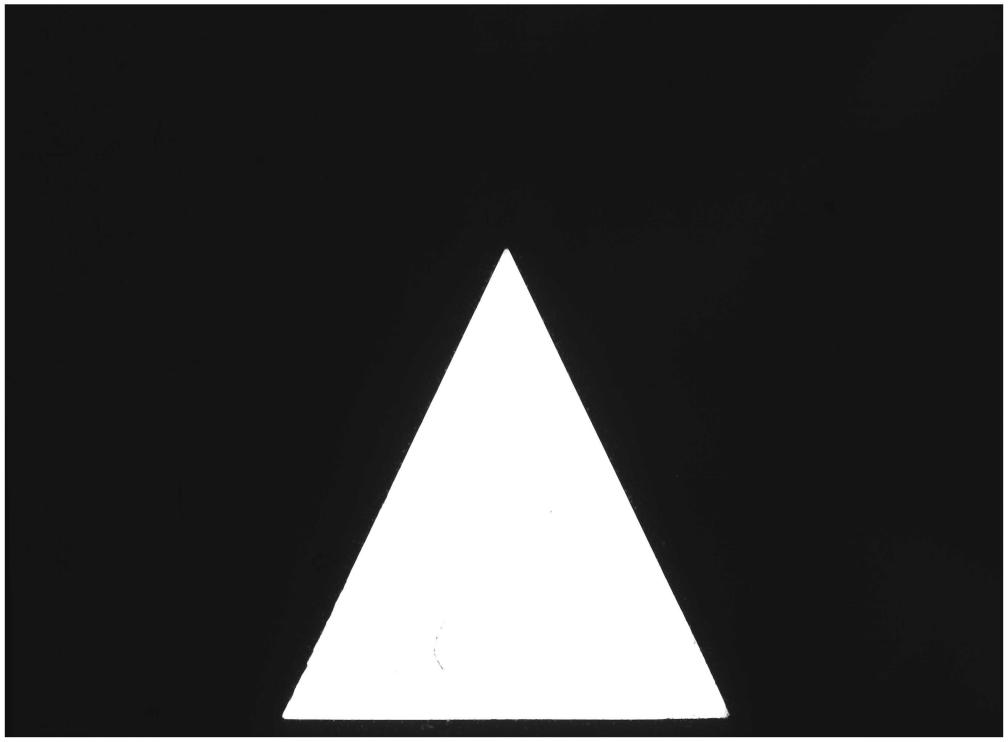
Official Seal.

FUN			BOOKOREA	LLOWED PENSION	13.
STA	TE OF GE	ORGIA.	10	Participate & Course Man.	
Co	anty of Kill	iron		J-Clisale	y
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	6. Mid			That she is the Wi	low of
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<u> </u>		day of		190	
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<u>.</u>					
Deponent a		经验的 工作。在1000年,10			1
soldier, and	at she has never	os wife of said dec married since his	second soldier, duri	ng his service in the Army	
the year 15	Cal abo has never	narried since his	death aforesid, an	d that she became his w	/ All A life is
the year 18	Co has never ;	married since his	death aforesaid, an	Trillon	16 4 15
the year 18 L1 County, un year coding	ave been allowed an i der Act 1900, for the p Documber \$1, 1906.	narried since his radigent panelon rear 1905, and nor	death aforesaid, an	d that she became his w	16 4 15
the year 18 L1 County, un year coding	ave been allowed an I	narried since his indigent pension rear 1905, and nor before me	death aforesaid, an	Trillon	16 4 15
the year 18 L1 County, un year coding	der Act 1900, for the procumber \$1, 1906.	narried since his radigent panelon rear 1905, and nor	death aforesaid, an	Trillon	16 4 15
County, un year ending	der Act 1900, for the grant for and makes and 1900, for the grant for and makes the control of the grant for and makes the control of the grant for any of t	natural since his midigate penalting a second secon	death abreved, and a resident of the property for the pro	Trillon	16 4 15
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County, un year ending	der Act 1900, for the parties of the Act 1900, for the parties of the Act 1900, for the Act 1	narried since his midgent penalon (cone 1005, and not before me 1 1006 County,	death abreveld, and a resident of apply for the purity for the pur	Fullon major provided by law to Fullon Seele Fr County: bestly that I am made the above affidavi, and allegans as a field of the second of	the in
County, un year ending	der Act 1900, for the parties of the Act 1900, for the parties of the Act 1900, for the Act 1	narried since his midgent penalon (cone 1005, and not before me 1 1006 County,	a resident of apply for the p	Pullon mion provided by law for the pullon for the	the in
County, un year soding Swood State of Hull soquement to be day of the sound sound to be day of the sound sound to be sound to	ave been allowed an index Act 1900, for the procumber \$1, 1900, as to und, subscribed and the procumber \$1, 1900. Any of Act Act and the procumber and the Act and the facts of the procumber and the facts of the procumber and that the facts of the procumber and th	narried since his midgent penalon (cone 1005, and not before me 1 1006 County,	death abreveld, and a resident of apply for the purity for the pur	Fullon major provided by law to Fullon Seele Fr County: bestly that I am made the above affidavi, and allegans as a field of the second of	the in

Criminal Court of Atlanta.

Atlanta, Ga.,______

Georgia Jultan County Reasonally Came before me the Many Jane Ridling who an oath says that her husbarrel That & hidling Came home framewar in 1864 an an hanarable Furlaugh- that he was dick Several months and unable To return to his Cammand until near The end of the war. He started back To his Command a while before The Surenelis but was unable to reach it before he heard of the Surrinder when he returned home. He saw on The Dension Roll and drawing Densians before he died. Swarn to & Subscriber) before me Ang 2 ml 1901 Mary Jane in Angling John A Wilkinson Orring



POWER OF ATTORNEY.

Ordling, M.V. ACT OF Farlian Co. (For Those Aiready Enrolled.)		IN day of	at	to receive	,		STATE
No. 2343	Brecuted	1 .	1	ive and			e of
INVALID	ated in	WITNESS		200			
SOLDIER'S PENSION.	1 presence	WHEREOF,	West Statement	receipt for			GEORGIA
1898.	e of	CEOF,		the per		County.	3
Name MY Ridling		I have h		pension p	The state of the s	· ·	-
County Fullow		hereunto	ьу	paid her	· L		
Amount, \$ \$50 00				hereon and	hereby authorize		
1998.		set my hand		d request	thorize		
RICHARD JOHNSON,		d and		est that			
Commissioner of Pensions. WARRANT HANDED TO		and seal, this		at he			
apper		his		remit			
660. W. MARRISON, STATE PRINTER, STLAVIA	L. s.			same			
no data	ت		1	to I	-		

STATE OF GEORGIA, County. I,	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
Executed in presence of	day of
SOLDIER'S PENSION. INVALID SOLDIER'S PENSION. 1900. Name W. M. LINDSEY, County Warrant issued West, JOHN W. LINDSEY, Commissioner of Practice. Son W. Barrico, Buse Prince, Albert. Over W. Barrico, Buse Prince, Albert.	Courty Courty County County County County Disability Add Amount, & OC & WARRANT HANDED TO Courty County County County County MARRANT HANDED TO County Count

County. For Applicans Heretofore Allowed Pausian.

44 TOUDIONS TOURS TOURS TOURS TOURS
STATE OF GEORGIA,
Fulton County.
Dersonally appears M. V. Killing of Falkon
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State and County, and has resided therein continuously ever since the
day of 1840 that he enlisted in the allies
the Confederate States (or of the Server of
the Confederate States (or of the State of Confederate) during the war be-
tween the States and served as a criportal in Company S., of 3 th
Regiment of Volunteers
engaged in such military service in the State of
day of he was wounded, injured or diseased as follows:
warming left fort, desidling
same -
The second secon
Deponent makes application for it
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1900. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Dollars, for the year 189
Sworn to and subscribed before me, this, the Me. La, Ridling
day of Dranch 1900. POST OFFICE
- Ithing
Nove.—State fully the nature of wound or character of lisease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
JAME OF GEORGIA,
Falkon County.
· ガ ガノブ/ ·
I, Tr. Id. The Ordinary of said County,
to certify that I am well acquainted with M. I.
applicant in the foregoing affidavit, and am well satisfied that the stotements and he is
a his said amdavit are true, and I know 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 the control of
nere.
Ordinary Jul Garage
Ordinary County.

For	Applicants	Heretofore	Allowed	Pensions.
STA	TE OF GEOR	County,		
Pe	rsonally appears	MY Red lu	ig of Th	illon
day of	State of Georgia, who dent of said State, and	18 40 that he calists	tiauously ever sir	ice the
	and served as a Ov	Trees and	during th	ne war between the
in such	military service in the	State of La 6 2, he was wounded	, injured or diseas	he day
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			The state of the s	
No.				
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Depo ing Oct	onent makes application ober 26th, 1901. I	n for the pension to have heretofore und	which he is entit er said law as	led for year end-
	5020	Dollars for the	been allowed an i	nvalid pension of
54	day of Jav		toffice acta	ula yo
NOTE -	-State fully the nature of the w	M	which causes the disabil	ity, and explain partic-
STATE	OF GEORGIA,	ounty.		
do certify applicant i	n the foregoing affidavi	t, and am well satisfied	that the state	thethe
, build	affidavit are true, and e resides in this County	I know he is the indivi	dual he represent	its made by him s himself to be
	Given under	my official signature as	nd seal, this	8 th
Alla	day of fa	John A	eviene	WAS
here		Ordinary	Fulton	0

POWER OF ATTORNEY. STATE OF GRORGIA, 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, have hereunto set my hand and seal this day of 1802. [L. S.]

(FOR THOSE ALREADY ENROLLED.)	MOLDIER'S PENSION 1902.	omicy Wilton M. Regiment 38 ft from M. Regiment 38 ft from motify floor in fact Motify floor motify 8 57 %	HOHN W. LINDSEY,	WARRANT HANDED TO	The state of the s
Wayne States (OF OF THE SERVICE OF	ZOGGZ	e	11 3	12

satisfies appears

1. Organ who belog duly swort may but only that he is a bond fide citize sident of said State, and has reacted the modulinion by ever since the

County.

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

POWER OF ATTORNEY

STATE OF	GEORGIA, County.	}	*
r,		hereby authorize	
***************************************		***************************************	
		nsion paid hereon and request that he	remit same to
		by	
IN WITN	ESS WHEREOF,	I have hereunto set my hand and seal th	ıis
	18		
			for so i
Execute	d in presence of		[I S.]
· · · · · · · · · · · · · · · · · · ·			

M.U. Color 130. ALREADY ENROLLED.	1/3	S PENSION	03.	hidolling	Regiment 38 Ju.	8061 / 6/	LINDSEY.	HANDED TO
fultons,	No.	SOLDIER'S	16	Name MYC	County HU	Amount, \$ 50	JOHN W.	WARRANT

FOR APPLICANTS HERFTOFORE ALLAWED PLANTS

STATE OF GEORGIA. Halton. County. Fulton. Personally appears MV Riddling County, State of Georgia, who being duly sworn, says on oath that he is a bone fide citizen and resident of said State, and has resided therein continuously ever since the 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 Coffeeral in Company Q, of 38 th Regiment Volunteers Lyordon 's Brigade; that whilst engaged May 1862, he was wounded, injured or diseased as follows: 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 Dollars, for the west 1901 Sworn to and subscribed before me, this the) day of JAN 13 1902 STATE OF GEORGIA, i ulton County. I John R. Wilkinson Ordina 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, a host grains and and a line in Given under my official signature and seal, this_ Afix yeur neal here Fulton. County.

POWER OF ATTORNEY

LAW ULLINGUIZ HERELALORE UTTORE TOTAL LEURIOUS

STATE OF GEORGIA,)
County.
Personally appears, MV Reddling 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 Just 1840 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 look t in Company a, of the Regiment
of Younteers Yorkon 's Brigade; that whilst engaged
in such military service in the State of
of May 1863, he was wounded, injured or diseased as follows:
Shot through left foot
aff for
The state of the s
STATE OF THE STATE
THE RESIDENCE AND ADDRESS OF THE PARTY OF TH
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1903. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1902.
Sworn to and subscribed before me, this the
/ / day of 1/\\\\ / 1 1909
Post-office
NOTE -State fully the nature of the wound or character of disease which causes the disability, and explain
particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
County.
I, John & Williamson. Ordinary of said County,
do certify that I am well acquainted with MU Weildling
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 350N 21 100m / 1903
All John A Wellinsons
eon }
County.
Note.—Fill all blanks and of Company and Regiment.

NOTE .-- All vouchers and affidavite must bear date after January 1, 1903.

STATE OF GEORGIA,	}		
#60106.30 V St St VI	COUNTY.	. •	
I,		hereby	authorize
		and the second s	
to receive and receipt for the	pension paid hereou,	and request that he remit	same to
	_ by		
In Witness Whereof,	I have hereunto set my	hand and seal, this	- 0000000000000000000000000000000000000
day of	1904.		
	Market Control of the	THE RESIDENCE OF THE PARTY OF T	[L. s.]
Executed in the presence	of		
	· · · · · · · · · · · · · · · · · · ·		

SOLDIER'S PENSION

1904.

Sounty Fulton:

Co. A. Regiment & E.

Bisability And in free

JOHN W. LINDSEY,

Commissioner of Prusions.

WARRANT HANDED TO

(FOR THOSE ALREADY ENROLLED.)

DISABLED

No.

Ridding m. 2.

no date

POWER OF ATTORNEY.

STATE OF	GEORGIA,	OUNTY.	
	Ī,		hereby authorize
to receive an			d request that he remit same to
In With	vess Whereor, I have	ve hereunto set my ha	nd and seal, this
day of	1.0 M. H.	1905.	e.
Exec	uted in the presenc	e of	[L. 8.]

Name M. J. Chidell. County Fulton.

Disability Meda

COR THOSE ALREADY ENROLLED,
No. 70
DISABLED
TOOS.

JOHN W. LINDSEY,

Cammissioner of Pension

WARRANT HANDED TO

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CHELY PROMED DENVELORE

TURNIUM.
STATE OF GEORGIA,
Fulton. County.
Personally appears 11 1 Meddling
County, State of Georgia, who, being duly sworn, says on oath that he is a some fide sisting
and resident of said State, and has resided therein continuously ever since the
day of that he enlisted in the military service of the Con
during the war between the
States, and served as a Company of 32th Book
Volunteers January 's Relander that will be
in such initiary service in the State of
of 2,201 186 3, he was wounded, injured or diseased as follows:
Dist Insough left fort
and the state of t
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 County, been allowed an invalid pension of Dollars, for the year 1908. Sworn to and subscribed before me, this the day of JAN 21 1904. Post-office Challon active particularly the nature of the wound or character of disease which causes the disability resulting from the wound or disease.
STATE OF GEORGIA
Fulton. County.
- a up cw:u:
do certify that I am well acquainted with III & Sandalines
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
day of
AME Alle News
Orthary Fulton. County.
Nove, - Fill all blanks and of Company and Wards in
Nors.—All vouchers and affidayits must bear date after January, 1, 1804.

STATE	OF GEOR	GIA.				
E	ilton.	COUNTY.	{			
- Lu			1	17	4.4	е.
Person	ally appears.	t. V. Ole	ddlir	eg of Fi	ilton.	
	te of Georgia, who					delaca
and resident	t of said State, and	d has realded t	harely continu	ionalu avan ala	ee the	nusen
day of		18 4	he entired in	the militame	ce the	
foderate Ste	tes (or of the State	. D	as did	duning	service of the	Con-
of L					_	
		nteers		's Brigade; th		
	tery service in the				the	
of	may		was wounded	, injured or d	iseased as fo	llows ;
Di	-1.00	· la d	One -	1 100		
Sun	aucea	leg	ma	9 180	ν	
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Fift	4=		Dollars, for			on of
arwoner t	o and subscribed	before me, thi	a the	M. 11.	Dis	1
	_day of JAN	1 2 1905 19	005.	- 01	1186	314
	day of JAN	Wicking	Post-o	ffice The	allal	on Ch
Note.—Sta	ate fully the nature of the disability					
STATE	OF GEOR	GIA.	1			
Fulto	on.	COUNTY.				
7	OUA		you (- 0 "		
do operation of	at Tam well acq	nainted with		Ordina		
	t in the foregoing			Maar		
by him in hi	s said affidavit are	true and The	iow he is the	ndividual bar	statements	made
	at he resides in th		low he is the	natividual he	represents hi	mself
o oo, anu tu	Given under n	•	ature and coal	this JAN A	3 1900	
	day of	4 omerar sign	1905.	tui5	1	17-11-200-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-
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Amx youn			MINU	Limon		
North Control		Ordin	ary Fig	ilton.	Cour	ıty.

Nors — Fili all blanks and of Company and Regiment.
Nors — All vouchers and affidavits must bear date after January 1, 1000.

COR THOSE ALREADY ENROLLED.) No. IF	SOLDIER'S PENSION 1906.	Name M. I. Middlung. County Fulton. Co. Regiment Soll. Disability Seg deadler	Атони, в С	JOHN W. LANDSEY,  Commissioner of Pensions.  WARRANTH HANDSON INC.	
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State of Georgias

FOR APPLICANTS HERETO PORE ALLOWED PENSIONS.

# POWER OF ATTORNEY

STATE OF GEORGIA,	-
I, My Rieling	, hereby authorise
to receive and receipt for the pension paid hereon,	and request that he remit same to
at	P1
IN WITNESS WHEREOF, I have hereunto set my heavy of1907.	and and seal, this /
Executed in presence of	news -
	**

County Fillton.

County Fillton.

Co. L. Regiment M. Landsex.

Co. L. Regiment M. Landsex.

Committee M. Lindsex.

Committee M. C

State of Cooragia

FOR APPLICANTS HERETOGORB ALLOWED PENSIONS

John John

				INTOINT AN
Sta	te of Georgia	A. )	7	1,200
	The same of the sa			
	Fulton. Co	1///		
Po	ersonally appears M.	1. Nia	dlingos_	Fulton
County,	State of Georgia, who, being	duly sworn.	save on out at at	
	- 90. Bard State, and has	resided thomas		10-
	10/13:	that he enli	stad in al	. ,
	teres, you or the State of	Mar	during	the war herween at
States, an	10/	SK	Company o	f Ath Parimon
in and	Volunteers		1. 22.1 4	
of such n	And a mer age are the State	e o1_		
01	May 1800	, he was w	ounded, injured or	diseased as follows
9	11/11/			
Cit	amea al	Z.		
Fifty		County	y, been allowed an ars, for the year 18	invalid pension of
Swori	to and subscribed before n	5_1906.	Post-Office 6	Vestato a
100	- College	24		The same of the sa
rticularly the	State fully the nature of the wound extent of the disability resulting fro	or character of om the wound or d	disease which causes the	disability, and emplain
State I,	of Georgia, Fulton, cou  MULKI  at I am well acquainted w	nty.		ry of said County
e applicant	in the foregoing affidavi	t and am1	v. Judo	lling
him in hi	s said affidavit are true, and	I know he i	satisfied that the	statements made
be, and tha	t he resides in this County		the individual he	represents himself
	Given under my official		seal this IAN	1 1906
	day of		1906	2 1000
	-	OV	PWiering	ma l
Afflyt }   rour    teal    here	- 17	Ordinary	Fre T	long
	W 2011 11 11 1	Oranal y.	1.111	County.

Fulton		}	,
Personally appears.	M. V. Ri	dling of	Fulton
County, State of Georgia,	who, being duly swe	orn save on soth that t	
and restrictly of said State.	and has resided the	arain continue 1	
any or the second	106777: that/he	onlieted in the	
federate States (or of the S	tate of	thirsted in the militar	ry service of the Con-
States, and served as a		durin	g the war between the
111 41	unteers	in Company Q	of OO th Regiment
in such military service in	the Control	's Brigade	that whilst engaged
of Thay			, on theday
0'11	, he w	as wounded, injured o	r diseased as follows :
Mariled	llg,		
plan to	11,		The same of the same
		-	
1 11			•
			and the second s
Sworn to and subscrib			r 1906. Jedling
Jahn R. Wilk	enson.	Postoffice	
Norm.—State fully the nature particularly the extent of the disability	The state of the s	ser of disease which causes and or disease.	the disability, and explain
State of Geor	gia,	N 218	
Fulton	_County.		
I, John R.	Wilkinson.		
,	(/.	H / Dording	pary of said County,
to certify that I am well acc	quainted with	to the state	aring
he applicant in the foregoing	amdavit, and am	well satisfied that th	e statements made
o be, and that he resides in t	re true, and I know	he is the individual h	e represents himself
and endone restrict in f	dis County.		- AN
day of	my omerat signatur	e and seal this	N. C. A. T. C. A.
Av. Care Britis	J.	1907. hn R. Wilkins	on.
PON PON	ER OF ON	Salvou Marilto	n. County

Norn.—Fill all blanks and of Company and Regiment.
Rorn.—All voinchest and allifavila must beer date after January Las. 1806.

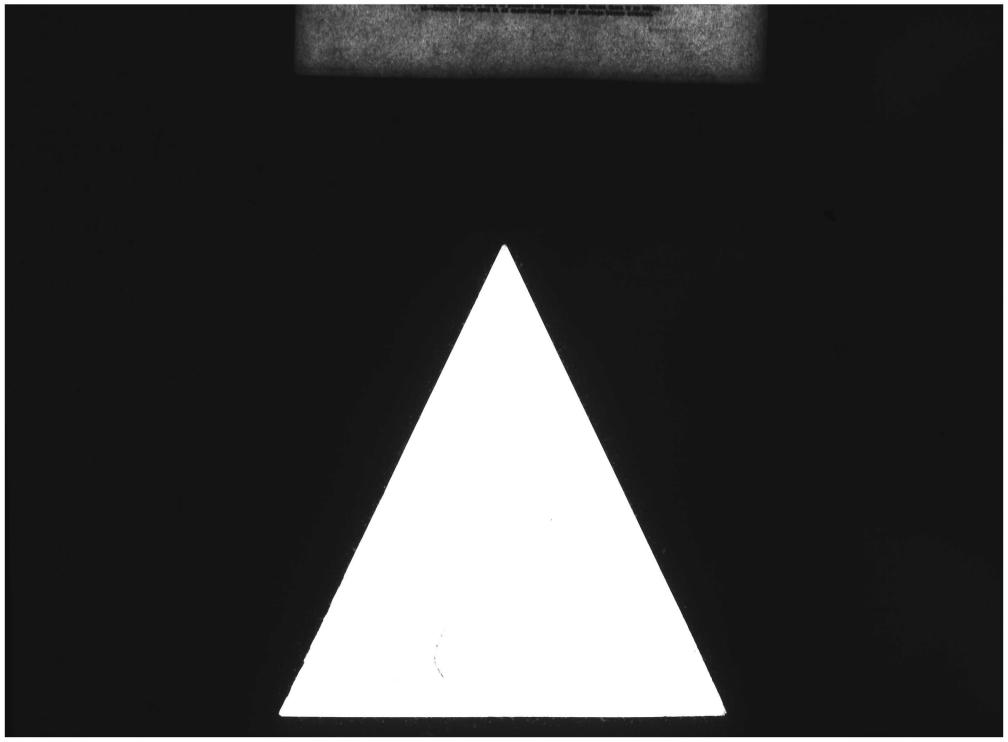
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Witness my hand this.

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Company Company

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LINE AND THE RESERVE OF THE PERSON OF THE PE	DER ACT APPROVED OCTO	TOR O. 1801 Ward Second of Labor.
STATE OF GEORGIA	4 . 3	The second secon
Tites early have very area	· · · · · · · · · · · · · · · · · · ·	· · · · · County.
Personally before me	iomes Mrs. A. G. Kall	100
THE PROPERTY OF THE PROPERTY O		or said county,
or only and one of the control	oath says that she is the widow of	Continue of the second second
who was duly enrolled as a.		
d Little		A TOWN THE REAL PROPERTY.
alitiw all	The part of the part of	and the second second
Dollars from	Man	county for 19/ and that the said
M. V. Kidling	died in Leel	lot.
the 16 day of Fel	O durante a sales a sensales	county on
the later and of the second	1918, and at the time o	his death a Pension of
was due him from	Luction	
Applicant further awears/that	WI	P
The second secon	are married the said.	
theday of	the state of the same of the s	Clorecounty and
State of Zeon	led and maided the tr	
as his lawful wife, and is now	his dependent widow	n the date of marriage to his death hat the Pension so due and unpaid be
paid to her.	The sales of the sales of the sales of	hat the Pension so due and unpaid be
Sworn to and subscribed	$\sim \nu_8$	Mel
10011	Defore me thisday o	
HULLER WALK	seems of 8	D. 10.
FILE STATE	C. C. C.	Ridling(LS)
Eden	County,	Ridling(Ls)
Esta	County.	Ridling(LE)
The state of the s	60000	Bidling(LE)
E. C.	County.	Bidling(LE)
	APPIDAVIT OF WITNESS.	Bidling(LS)
Personally before me to	APPIDAVIT OF WITNESS.	Bidling(LS)
	APPIDAVIT OF WITNESS.	Bidling(LS)
Personally before me to on oath says that he knew.	APPIDAVIT OF WITNESS  County  M. U. R. L. L.	Bidling(LS)
Personally before me co on oath says that he knew	APPIDAVIT OF WITNESS  County  Mrs. C. J. L. Y.  Mrs. C. Mrs. C.	Bidling(LS)
Personally before me to on oath says that he knew.	APPIDAVIT OF WITNESS.  COUNTY.  Mrs. Q. Mrs. Q. Mrs. Q.	Bidling (LS)
Personally before me co on onth says that he knew	APPIDAVIT OF WITNESS. Self. County.  Mrs. C. Mrs. C.  Wrs. C.  Own that the said.	<b>建设设施,设施的</b>
Personally before me to on onth says that he knew	APPIDAVIT OF WITNESS. Self. County.  Mrs. C. Mrs. C.  Own that the said.	form of few married in the county
Personally before me to on oath says that he knew	APPIDAVIT OF WITNESS.  County.  Mrs. C.  Were that the said.  Were in this line to be been add.	form of few married in the county
Personally before me to on oath says that he knew	APPIDAVIT OF WITNESS. Self. County.  Mrs. C. Mrs. C.  Own that the said.	form of few married in the county
Perionally before me to on oath says that he knows.  and that he knows.  the above applicant; that he kn and	AFFIDAVIT OF WITNESS.  Sect. County.  Mrs. C.  Mrs. C.  Own that the said.  With in the State of	form of the married in the county
Personally before me to on oath says that he knows.  and that he knows.  the above applicant; that he knows.  of	APPIDAVIT OF WITNESS.  County.  Mrs. County.  Mrs. County.  Own that the said.  Vers in this is the Rists of	form of few married in the county
Personally before me to on oath says that he knows.  and that he knows.  the above applicant; that he knows.  of	AFFIDAVIT OF WITNESS.  Sect. County.  Mrs. C.  Mrs. C.  Own that the said.  With in the State of	form of the married in the county
Personally before me to on oath says that he knows and that he knows the above applicant; that he kn and of	APPIDAVIT OF WITNESS.  County.  Mrs. County.  Mrs. County.  Own that the said.  Vers in this is the Rists of	form of few married in the county
Personally before me to on oath says that he knows and that he knows the above applicant; that he kn and of	AFFIDAVIT OF WITNESS.  Out County.  Mrs. Cou	form of the married in the county
Personally before me to on oath says that he knows and that he knows the above applicant; that he kn and of	AFFIDAVIT OF WITNESS.  Sect. County.  Mrs. County.  Mrs. County.  Were in the line the State of	form of few married in the county



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WIDOW'S	tance like		Witness a Ex	
Indigent Pension.	io.		o me at ny hand thi ecuted in p	OE GEORGIA
1901.			resence of	OKG
Name Manay Chidling			day of.	Coun
Widow of Mm & Rivling				hereby
Approved 4/2 2 1901.	持持是負責人		by his	authoria.
JOHN W. LINDSEY, Committedoner of Personal.			check or 1	eipt for th
WARRANT HANDED TO			190	e pension a
				Lilicoped and
Geo. W. Marricon, Blair Printer, At 1995 OF				Ī

JM D Long 16 J Maddof of said State and County, having	27. How was she supported for 1899 and 1900? Relatived and friend
of said State and County, having	
been presented as a witness in support of the Application of Mrs. Mose Co. Boother	28. How much did applicant contribute to her support for last two years?
for a Pension under the Act of Orl 1900, and after having been duly sworn true answers to make to the	dive a full and complete statement of applicant's physical condition a
following questions, deposes and answers as follows:	and feeble
1. What is your name and where do you reside? It At a browng un	90 What a same a sa
	30. What interest have you in the recovery of this pension by the applicant?
2. Are you acquained with the applicant, Mrs. Nancy Catherine Rolling	
11 eo. 1154 fong have you known her?	Sworn to and subscribed before me this 35 %
3. Where does she reside, and how long and since when has she been a resident of Ald. Serve	day of TEbra 1901
Marila and Olde of Georgia for my 1/1 Mg	Dobugelvilling hy This m
4. When and where was she born? The Co Gargier 1824	2.00 Cadden
5. Were you ever acquainted with her husband? Yex	County. Witnessee.
6. Where did he reside in 1861? In Decalf Co Georgia	
7. When and to whom was he married? how 1858 Mine House B. M. Je	Affidavita of DI
8. When and where was he boin? Jackson Co. Giorge	Affidavits of Physicians.
9. How long have you known him? of other 40 years	STATE OF GEORGIA,
10. When and where did Malle and Jodes B. Di.	
10. When and where did Milleans Joshes Ridling enlist in the war between the States, and in what Company and Regiment did be enlist and how do you know this?	
Ti . 30 da. Kenny A Contint to the	Personally before me comes AN Lines 17
11. Were you a member of the same Company and Regiment?	The state of the s
	out that they have examined carefully Men
12. How long did he perform regular military duty? From 1862 to 1863	applicant for a Della
	such personal examination say that her physical condition is this. Office in old restil-
When and where was his Company and Regiment surrendered and discharged from service?	when and time of themselving in touch and
Bustour not holl a	earn appendent thick renders her mable to
14. Were you with the command when it surrendered?	extent She is Physically Those dans
15. Was Billiam Josper Victories the husband of applicant present?	and we have no interest in said pension if allowed.
a see to see the	Sworn toward subscribed before me this.
16. If not present, where was he? He was first soul	day of Tebary 1906 ) WD Vinson my 8.
17. When and where did he leave his Command? Grandous on n.C.	
For what cause?	John Miller Commy, O. of 1/
By whose authority he left? Surrender of Santage (	Thellows County)
How do you know all this? (State fully and clearly.) By the six Services	
a world	ORDINARY'S CERTIFICATE.
	STATE OF GEORGIA,
18. When and where did Hullyum asper Rusling die?	
May 18-1898 A / 10/1/- 0. 47.	- Country,)
Where did he reside at his death and how long had he been a resident of Georgia at his death?	1. John Rloy Physics
The Manda ya Hillon Co. ( Ill This les.	certify that the applicant, Mrs. M. & Research Country in and for said county, hereby
20 Do you of your own knowledge know that applicant is the lewfol widow of WW. Al.	resides in said
- flight Lighting	189AL and that the -it was as USIA ITE
21. Has she remained unmarged since her soldier husband's death, and is now his widow?	
	are entitled to full faith and credit
22. What properly, effects or income has the applicant, if any, and how do you know this of your	I do further certify that before anymains the formal
owa knowledge?	oath herein prescribed, and the full text of the affidavits was read to the applicant and said witnesses took the was signed and subscribed.
	I trustee west at a second of the second of
23. What property effects or income did applicant possess in 1899 and 1900 and what disposition did she	returned for taxation in her own name in 1899
make of it? The owned half come	of property and in 1900
	Witness my hand and official seel this
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to	witness my hand and omcial seal, this day of 190
whom?	(SEAL) Ordinary,
	The state of the s
25. What is applicant's physical condition and her chances and ability to earn a support?	Norm—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, additional anidavits may be attached, it blank spaces are insufficient.  3. All anidavits 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 28th April, 1865, not entitled.
Bad	and the evidence you shall give will be the whole truth. So help you God' the questions asked of you,
The state of the s	3. All affidivits must be made before Ordinary.
The second secon	widows. Those married since 20th and 1995 are said they were soldiers need apply—and are now
	5 Witnesses and two Physicians are necessary to make out claims.

John J. County.  John J. Harman  of said State and County, having been presented as a witness in support of the Application of Mrs. Mary factorial and County, having for a Pension under the Act of J. 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? County Harman	27. How was she supported for 1899 and 1900; Maria Mar
2 Are you acquainted with the applicant, Mrs. Many June Milling  If so, how long have you known her?  3. Where does she reside, and how long and since when has she been a resident of this State?  Many Many Many Many Many Many Many Many	30. What interest have you in the recovery of this pension by the applicant?  fall an illustration about 10 years ago uses crutiles not sworn to and subscribed before me this 23 au  day of Africa 1901 Selma Harmon  John Welling ordered,
5. Were you ever acquainted with her husband? These to Righting.  6. Where did he reside in 1861? De Ruth Co.	County. Witnesses.
7. When and to whom was he married? 15 64 6 Many Q- Descript  8. When and where was he born? Shout 15 41 - Descript  9. How long have you known him? Than 15 6 - to him charter  10. When and where did Than to Rulling enlist in the war between	Affidavits of Physicians.  STATE OF GEORGIA,  County.
11. Were you a member of the same Company and Regiment?	physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs.  applicant for a Pension under Act of 1900, and after
13. When and where was his Company and Regiment surrendered and discharged from service?  14. Were you with the command when it surrendered?	such personal examination say that her physical condition is this.
14. Were you with the command when it surrendered?   Shall   15. Was   15. Was   16. W	and we have no interest in said pension if allowed.  Sworn to and subscrited before me this  day of
17. When and where did he leave his Command? And Survey 1865.  For what cause? Discusses - Biographics and Survey 1865.  By whose authority he left? Complete Survey and Survey and Survey Surv	ORDINARY'S CERTIFICATE.
16 When and a mile of the property and of my own knowledge.	STATE OF GEORGIA,
19. Where did he reside at his death and how long had be to be	I, Ordinary in and for said county, hereby
20. Do you of your own knowledge know that applicant is the lawful widow of	18, and that the witnessee, Mr
21. Has she remained unmarried since her soldier husband's death, and is now his widow?	are entitled to full faith and credit.  Are of trustworthy character, and that their statements  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 affidavita was read to the careful
22. What property, effects or income has the applicant, if any, and how do you know is of your own knowledge?	is a signed and subscribed.  I further certify that the tax digest of
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? Head Manue - Mo disposition of the	of property, and in 1900
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom?	(SEAL)
25. What is applicant's physical condition and her chances and ability to carn a support?	Norse—i. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so kelp you God."  2. Additional affidarits may be said to be the whole truth; so kelp you God."  3. All affidivis must be made before if blank spaces are insufficient.  4. Only widows who were the wives of classes.  4. Witnesses and two Experiment of the control of the con

WINOWS HERETOPORE ALLOWED PENSIONS

						r				MINOLIN
	to recei	ve and re	ceipt for the	pension	paid h	ereon, an	d request	that he	remit	same to
	In	Witness 1	Whereof, I ha	ave hereu	nto set		and seal	*hie	P.O. Section of Contraction	ST
	day of			1902.		,	uad scar,	tuis		
	I	Execut <b>ed</b> in	n presence of			-				[L. S.]
		•								
							PF 1001			
10 1				F 1	- [	5 P	Ti I	. II	20	1.11
2013	Paid.		4	902	12	County	Regimen V,	f Pensuo	19	
2 3	fore		Ż	31, 1	de	- Si	SEY,	Sommissioner of ISSUED	0	DAMTA QA
3 34	1908c Heretofore	e	GE	ding Dec.	63 F	Ito.	LINDSEY		AND HANDED TO	1
34		No.		endin PAII	120	Fu	×	RANI	ZZ D HAN	
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County.

STATE OF GEORGIA.

1,.

hereby authorise to receive and receipt for the pension paid hereon, and request that he remit same to self tim patricular In Witness Whereof, I have hereunto set my hand and seal, this Williamon [L. S.] Executed in the presence of County of ... STATE OF GEORGIA FOR INDIGENT WIDOWS HERETORORE ALLOWED PENSIONS.

OLIN CONTROL POWER OF ATTORNEY!

STATE OF GEORGIA,

Official Seal. January 1902

Fulton. County.

# FUR INDIGERAL MIDOMS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Hulton	Nancy la Ridling
who, being sworn, says on	cath, that she is a bona fide resident of said County of
continuously ever since britis	te of Georgia, and that she has RESIDED in said Stat
- Walliam 9 K	That she is the Widow o
To of the ste	who was a soldier in Company
Volunteers, that he enlisted in said regiment of	THOS shout the mouth of
186_2, and served in the Army up to3	186 That he died
on the 20 day of	May 1998 That he died
	10/2
a + J	
and the second s	
	- Company of the Comp
Season of the season of the season of	deceased soldier, during his service in the Army as a
he year 18 S	his death aforesaid, and that she became his wife in
I have been allowed an Indigent pension	as a washing at
ounty, under Act 1900, for the year 1908, and	Pulton.
ear ending December 31, 1908.	now apply for the pension provided by law for the
Sworn to and subscribed before me,	m. h. Va si
day of JAN 22 1903 1908.	Maney Cothe Milling
	Maril .
Allie Killian , Ordinary.	Post-Office
tate of Georgia,	7 . 6
	I, John R. Wilkinson.
Fulton County	Ordinary of said County, certify that I am well
quainted with Mrs Margar to River	Cling, who made the above affidavit and
The state of the s	, who made the above affidavit and
a satisfied that the facts therein stated are tru	ne, and I know she is the individual she represents
reelf to be, and that she has continuously resid	ded in this State since the
y 01 but 18	
Given under my official signature and seal,	ALAN ON
was my omount signature and soal,	May or JAN 22 14113 1908.
Oppoint	om I weren
T mount	Ordinary of County.
A CONTRACTOR OF THE PARTY OF TH	Southly.

NOTE.—All blanks must be filled.

Youthers and additivite must bear date after Junuary let, 100

mu P. C. Cra

WARRANT ISSUE

	EORGIA,	}			
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to receive and r					
		at	oroon, and re	quest mat	ne remit sam
In Witne	ss Whereof, I	have hereunto	set my hand	and seal, t	his
day of	9 D 100 M.	1905.			
		<b>***</b> *********************************			[L.
Executed	in presence of				
ar, xx			*		
**		M			
5	•		No.		
		aling	lend, lend nent.	sions.	.905.
	SION,	adding	County,  Idling  kgiment.	y Pensions.	J. 1905.
	SNSION,	Medding	Eddling Regiment.	EY,	4.4 1905.
<b>93.</b>	PENSION,	To Middling	County, Standling	EY,	/ 24 1905.
0 <b>5.</b>	S PENSION,	FAID TO CHARLING	County, Standling	HN W. LINDSEY, Commissioner of Pensions. WARRANT ISSUED	HALDED TO

1905 WIDOW'S PEI

For year ending Dec. 3

Mu Haney

Fulton

# TOR INDIVIDUI BIDORO RENETUTURE ALLUMED PERSIONS. STATE OF GEORGIA. PERSONALLY COMES MES. County of Fulton. who, being sworn, says on cath that she is a bong fide resident of said County of .State of Georgia, and that she has resided in said State Volunteers, that he enlisted in said regiment on or about the month 186 2 , and served in the Army up to 3 3 Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 I have been allowed an Indigent pension as a resident of Fulto. County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 81, 1904. I. John R. Wilkinson. Ordingsy of said County, certify that I am well acquainted with Mrs. Muncy Colonic who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents

State of Georgia. herself to be, and that she has continuously resided in this State since the Given under my official signature and seal, this the NOTE.-All blanks must be filled. Vouchers and Affidavits must bear date after Sanuary zet, 1904

Manager and Control of the Control o
STATE OF GEORGIA, PRINCIPALITY AND MER. MIN.
County of Fulton. havey le. Ridling
who, being sworn says on oath, that she is a bona fide resident of said County
State of Georgia, and that she has RESIDED in said Sta
continuously ever since all your life. That she is the Widow
who was a soldier in Compan
of the Soth Regiment of Glorgin
Volunteers, that he colleted in said regiment on pr about the month of
1802, and served in the Army up to Close Har 180. That he died o
theday of1878.
10/0
And the state of t
Management and the second seco
NAC
and soverty
and the same of th
The second secon
Deponent swaare that the weeth wife of
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has soldier, and that she has soldier.
soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18
73 40
, and the state of
County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the
year ending December 81, 1905.
Sworn to and subscribed before me,
the day of 14N 2 1905, 1906. Hancy & Aldian
In William Ordinary. Post Office Mark (Italia
()
State of Georgia.
Fulton:
country of said County, certify that I am well coquainted with Mrs. Country (C. R. Alice, who made the above affidavit and
m satisfied that the facts therein stated are true, and I know she is the individual she represents
erself to be, and that she has continuously resided in this State since the all her life
ay of18
Given under my official signature and seal, this the day of 1905 1905.
day of1905.

------ AUTORDA LDUDIANO.

Tilton. _County. NOTE.-All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1905.

Ordinary of

Official Seal.

STATE OF GEORG	IA,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	on the first of the constitute
Ι,		The state of the s	hereby authories
to receive and receipt i	of		
In Witness Where	of, I have hereunto set my	hand and seal, this	- And the American
day of	1906,		
		7 1 (A) 2 ·	[L. S.]
Executed is	n presence of		

3/3/3	1		H	3	98	anne	Line.		8		
Jan Coul	96.	4	KEN	PRINS	Dec. 31, 19	0.000	Bull	INDSBY,	O //	of @	
Those He	190	No. G	DIC	SMO	year ending PAID	to a		OHN W. I.	WARRANT	AND MAN	
3			É		E C	Far	Widow				2

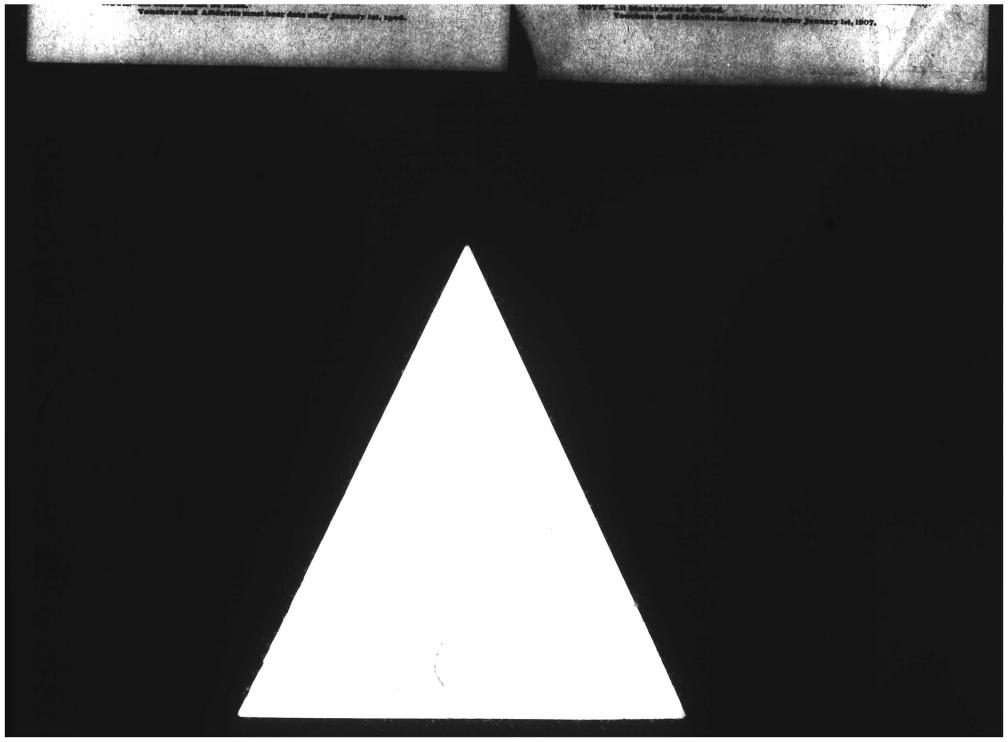
CH CHESTAL I PROSESSED CONTRIBUTE.

STATE OF GEORGIA,	
Courer, I	, hereby authorize
to receive and receipt for the pension paid hereon, and request the	t he remit same to
In Witness Whereof, I have herenato set my hand and seal, t	his
day of 1907.	[L. S.]

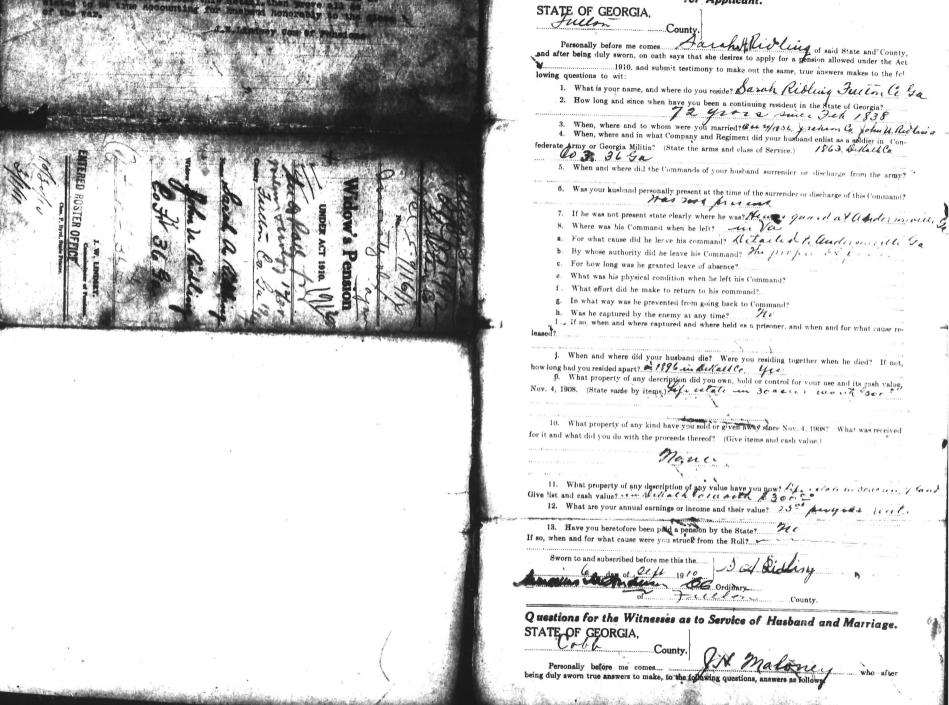


# herself to be, and that she has continuously resided in this State since the day of Given under my official signature and seal, this Official Seal

STATE OF GEORGIA,	PERSONALLY COMES MRS.
Who, being sworn says of	n oath, that she is a boys side resident of said County of
continuously ever since Bully of the	That she is the Widow of who was a soldier in Company
Volcunteers, that he enlisted in said regiment	
1864 , and served in the Army up to Li	189 8 That he died on
age and be	rusto.
I have been allowed an Indigent pension	as a resident of Fulton.  d now apply for the pension provided by law for the Laney Cher Rudel.  Fost Office
State of Georgia, Rillton.  Squalition with Mes Hancy London	I, John R. Williamson Ordinary of said County, certify that I am well Adding, who made the above affidavit, and
m satisfied that the facts therein stated are tr erself to be, and that she has continuously res	ne, and I know she is the individual she represents
v of 18. \$\frac{1}{2} \frac{1}{2}	d this theday ofJAN 2
Official	John R. Wilkinson.
HOTE AN STATE OF	dinary of Fulton. County.



UNDER ACT 191



for Applicant.

...1910, and submit testimony to make out the same, true answers makes to the fcl

1. What is your name, and where do you reside? Sarah Ribling Juiton Co &

2. How long and since when have you been a continuing resident in the State of Georgia?

federate Army or Georgia Militia? (State the arms and class of Service.) 1863. Bellack Co.

1. If so, when and where captured and where held as a prisoner, and when and for what cause re-

Nov. 4, 1908. (State same by items.) Left estate in 30 acces we will be

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

STATE OF GEORGIA	3. How long and since when has she continuously resided in this State? (Give date.)
that I draw the Lake Market I from the Lake M	4. When and to whom was she married? How do you know? 156 to We obling been 5. How long and since when did you know the result of the hor her
	6. When, where and in what Company on Bridge William Company
the fit the fell hov, 1906	about may 1st 1862 redsel Co Co 7 36 Sa ligt
That also know the witness who swears	from the second
	7. Were you a member of the same Company?
freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavity and that they all, are truthful trustweether.	o. How long within your personal knowledge did to
full faith and and its	pany and Regiment? A years from May 1662 to Deay 1864
That the Tay Patron	9. When, and where did his Command surrender, and was discharged?
1908 \$	doub know was in Prica
	10 W
Sworn under my hand and official seal of office this 3/ M day of Och	Ware you
SEAL	and how came you there? Co tues
Ordinary.	
Tultan County	11. Was the husband of applicant personally present at surrender? 20 If not
NOTES 1. Before any questions are appropriately to the contract of the contrac	where was he? Audissono u Sa as you ad when, where and for what
NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: You do solemally swear that you will true answers make to each of the questions asked you and the evidence of the property of the proper	did ne leave Command? (Give date.) I a dant to the day ditar it as uses of the
you shall give will be the truth. So help you God."  Additional affidavia may be given by the pour God."	authority did he leave his Command? Want d'cali
4 All affidavits must be made before the Ordinary. 3 Only widows who married before the Ordinary.	long was he granted leave?
at a midavita must be made before the Ordinary.  Only widows who married prior to first January 1870, are entitled.  Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.	
of wolfe person, or by gen-	12. For what cause, if you know of your own knowledge was he prevented from returning to his
'A.	
7	own knowledge or how? He was freshed before me the Sworn to and subscribed before me the
Lorgia Cada Camit	Sworn to and subscribed before me this the
	On Lay of Left 1010 At Maloney
in a cy dear I there en . All on about the rester	the day of 1910 a hord
Cole sincore to the cover of the standard the customer of the	Ordnary.
was daly swown by my ted	of County.
in the second se	AFFIDAVIT OF THE TOTAL
foregoing of bedook that he is truthful and	AFFIDAVIT OF TWO FREEHOLDERS.
runtworky and that his statements are en-	STATE OF GEORGIA,
ille I to purparth o Credit,	Sekall County. G.B. Bury J. Liff
Time under my hand and real	Personally before me comes who on oath says that they
	are freeholders of said County and that they know
A officer this day sips 1910	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.
to the same	Notes and accounts due
( Ordinary of Cooks Co	Total
	We know the property of the Bond (B).
and the second s	We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:
A CONTRACTOR OF THE CONTRACTOR	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
1	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 SaBabata Value of Language Sworn and subscribed before me this the SaBabata Value of Language Sworn and Sw
	10/
	Ordinary.

Ridling, Spiral A. (Mrs.)

ark

For Fullon county

1926

# Application for Pension Due Deceased Pensioner (UNDER ACT 1919) (To pay expenses of last illness and funeral)

(To pay expenses of last illness and funeral)

Those Haffines Ordinary

Forecasal a Fulling

Date of Death Fabrus 1927.

Amount \$ . 100

Approved and ordered paid

John W. Clark

Alai Z. 1321 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 payrolis to be permanently filed with them. Do not keep this application in your office.

78 /

Fulton Counter

Fullow

COUNT

Application to be Allowed Pension for Total Blindness Under Act of General Assembly of August 19, 1912.

Na Darale Ridling

COMPANY 7

REGIMENT 36 Ja
Approved
John W. Clark
Commissioner of Persons

Chas. P. Byrd, State Printer, Atlanta

GEORGIA Fullow County.	
Personally before me, the Orimary of said County comes HBB austaton of australes Co of said County who after home and	2
2 O O O O O O O O O O O O O O O O O O O	
says that he knew Sarah A. Kulling of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in	
County in this State marks 2 3	
a Pension of (8 1 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 § $\mathcal{V}bS_{i}OJ_{i}$ per	
sworn statements fully and completely ITEMIZED hereto attached.	
Sworn to and subscribed before me	
When Renachutodiary HBBankirton	
(Seal et Ordmary)	
CERTIFICATE OF ORDINARY	
that I personally know HB & auch Story of white granty do certify	
citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Miso Devals at Redding while in life and that this was the same person whose name appears on the Pension Roll of Tullow County, and	
the same person whose name appears on the Pension Roll of Tullou	
was paid a Pension of Control of	
in said County for 192 (a, and a 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 78 day of Act. 1927	
Seal or 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.	
and 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 renormed for services in the last illness for for funeral expenses, as the case may be) of	
and. The Ordinary must see to it that each bill is perfectly legitmate 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 mayment.	
6th. 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 this blank, when folded, is filled out.	

	STATE OF GEO	The same of the sa	71	, · · · · · · · · · · · · · · · · · · ·	
	Xulton	5 6 9	T.		
	Personally before	me, the undersigned	Ordinary of said Cou	inty, comes . 861	Abunding
th	o after being duly sw State of Georgia as	a member of Compan	V I Regi	ment 34	5¢h
C. pa	S. A. Vols., or Georgia 100.00  That	Militia, and has been	paid a pension of	Michellania an	nnually, and was so
	And that he make	P. of option ner	t he may be allowed		produced blindness.)
	ndness. Sworn to and subscribe		,	a un mercase in i	ns pension for total
thi	is 38day of	1982			
Allen		Ordinary.	1	lien	_
	Fulton	County.	dai	ahx 1	Pidlin
	STATE OF GEOR	GIA,		,	The state of the s
	Fulton	COUNTY.	4		
	Personally before	ne, the undersigned C	rdingry of said Com		
.01	C. C. K. Ademe	who after being	dula aman	ity, comes	
	E. C. K. Adomo	, who, after being	duly sworn, on oat	h says: That h	e is a resident of
	Fulten	County, and tha	t he is a practicing	physician, and ha	is been for
yea	rs, and that he knows	PAYAR. BISING	<b>6</b> ,	of said County.	That he is NOW
and	has been for the past	<b>thr.ee</b> y	ears totally blind;	which blindness	was the result of
• • •	Old age; atrop	hy of optic ne	rve s		
				_	
na A	Rugues	Ordinary.	Om	ad	ans B
	Fulten			************	
	STATE OF GEORG	IA,			
	Fulten	COUNTY.			
	5-0			ORDINAR	y's Office,
			<b>(</b>	October	281922
	I, Thomas I	i. Jeffries			ry of said County.
do c	ertify that Sax	ah Ridling	is on the	wi down	D is and County,
1	Fulton Cou	nty and has been on	id a seed of the	00.00	Pension Roll of
he is	a bona fide resident	of said County, and the	at he has become	199. 99 for	1915, and that
	Dr. C. H. Adams		ac he has become	totally blind. T	hat he knows Dr.
is a t	Dr. C. H. Adams truthful man and phys	sician of high standing	a resident practicity	ng physician of	said County, and
GIV	en under my hand an	d official	s, and what he say	s is worthy of	belief and credit.
above	and signed this the day stated.	and year		. 1X)	00 -
			Inas	11/1	ffne BS
,	SEAL)	Page	Ordinary	HISE	,
FA 201 - NO.	41	AND A STATE OF THE PARTY OF THE		THE CONTRACTOR	

No	
STATE OF GEORGIA,	
COURT OF ORDINARY.	State of Georgia, Jackson County.
Fel, 26 Term, 190.8	ORDINARY'S OFFICE,—88.
Certified Copy of	QCAP .
enificate of Mar-	of Ordinary of said County, do hereby certify that I have compared the foregoing copy of
ing to larah Thus-	Marriage Pertificate of John El
mondy on Nov. 27 1956	
	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.
iled in office	In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court
ecorded	of Ordinary, this the 260 day of February, 190 &
pok, page	J. Close
	Ordinary and ex-officio C. C. O.
Ordinary.	The second secon

This applicant sucars; That her hushand was detailed from Virginia as a quard at andersonville Ga / She down not Know nor lauld she know when he was detailed. The witness IN Maloney sincore That the husband served in Co'd" 36 ga frace May 1862 to may 186x and was detailed for a quard at andersonville Ga where he served and was paraled there or and of war, he was sent to anderonaile because he was disabled for field service 6,"8""//" 5/2" Respt. Applicant Georgian Jackson Bourly. 29 & certify that the above names Out parties were duly joined 1856 in Waterin on by me 27 Mm 185 AD. Pilheran J. S. C. JOS. W. AWTRY, Pres. O Trees.

PRANK B. LOWNDES, Vice-Pres. O Mgr

ATLANTA, GA, March/I/27/ 192

Mrs. C.H. Terry,

#197 Peplar Circle, Atlanta, Ga.

# TO AWTRY & LOWNDES CO., DR.

Phones: | WAlnut 7066 7067

# FUNERAL DIRECTORS

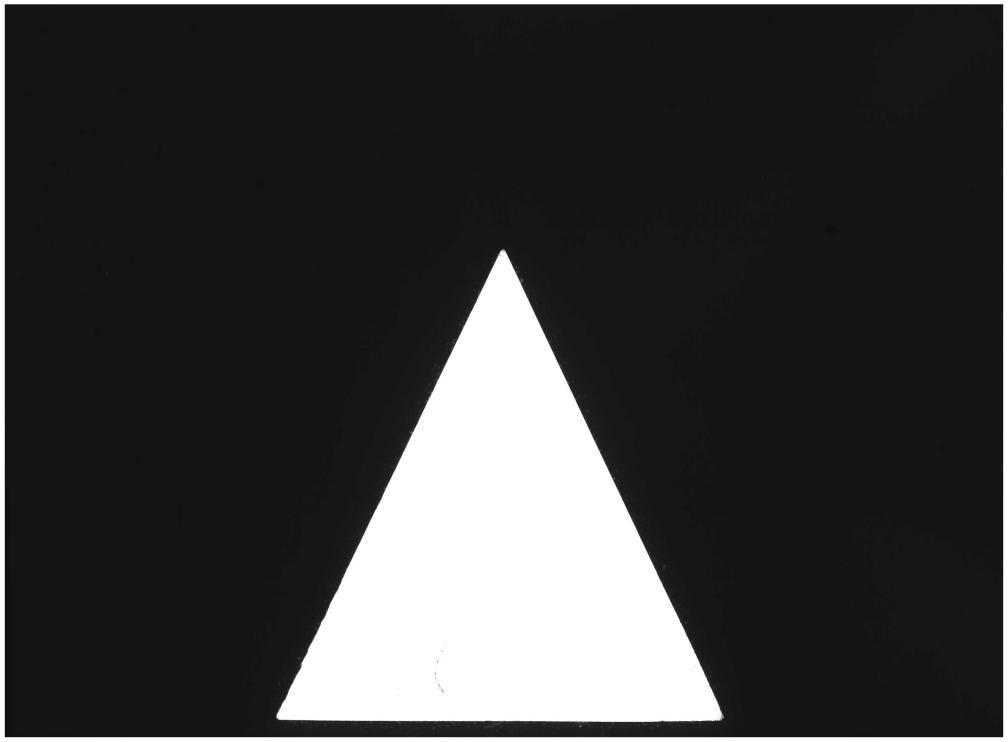
17 WEST CAIN STREET

For the funeral of Mrs. Sarah Ridling.

Feb/23/27/	Casket,	150.00
	Embalming.	15.00
	Hearse.	15.00
	Limeusine ( Complimenta	ry.)
	Vault.	55.00
	Dress.	22,50
	Pallbearers gloves.	2.00
	Constitution.	2.70
	Jeurnal.	1.50
	Georgian.	I.35
	G,	\$265.05

Consumally appearing 1473 Basilian was besters that the above are so just they and was for fine of supering the south of his Danak Ridling was for fine of huron to the south of before me . NB Bankston are this Feb. 78 1 977 and arbit 60

This applicant sucars; That hear hushand was detailed from Virginia as a quard at andersonville Ga / She down not Know nor lauld shetting when he was detailed The witness JA Maloney swears. That the husband served in G'd 36 ga from May 1862 to may 186x and was detailed for a quard at andersonnille Fa where he scraet and was faroled there or end of war he was sent to anderonaile because he was disabled for fill service Set witues answer to questionis 6, 8, 11 712 Resp. applicant



Adding, Thomas @		The second			
OODE SEC. 1284. (For Those Aiready Enrolled.)			by	to rec	STATE I,_
NO. 189		Exect	Witness my	receive and	TE OF
INDIGENT	8	Executed in presence of	з ту ћа	d receipt	
SOLDIER'S PENSION,		SUBSEIL	hand and seal, this	t for the	GEORGIA
1900.		e,	eal, this	e pension	County.
Name Thas le Ridling				allo	**
WARRANT ISSUED			_day of	ofowed, and	
Josep 1 1900.			•	request	
JOHN. W. LINDSEY, Commissioner of Pensions.				that	
WARRANT HANDED TO				he remit	_hereby
Goo. W. Harrison/Stato Printer, Atlanta.		_[L. S.]	1900.	same to	hereby authorize

# For Applicants Heretofore Allowed Pensions.

ST	ATE OF GEORGIA,
	County, 7
	personally appears has Cexicling of FULTON
	ty, 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 even
since	the 24 middle day of Dee 1840; that he is 59 years old and
by oc	cupation a Farmer; that he enlisted in the military service of the Confed-
erate	States (or of the State of) during the war between the States,
and s	erved for the term of 4 glass_ in Company Q, of 38 th Regiment of
	; that his physical condition is as
follov	General debility
that	his property consists of the following items.
of the	Pollers that by reason of his physical
	Donars, that by reason of his physical
that l	tion and poverty he is unable to support himself by his own exertion or labor, and be receives no pension but the one herein applied for.
1894	Deponent desires to participate in the benefits of the Act, approved December 15th, and the Acts amendatory thereof, and makes application for the pension to which he
	itled for the year 1900. I have heretofore as a resident of Fulcon
	y been allowed a pension for the year 189 4
S	
- /	worn to and subscribed before me, this, the day of Gany 1900.
1	day of January.  Ordinary.
	Ordinary.
_	
Stat	e of Georgia,
	FULTON County.
T	W. H. HULSEY, Ordinary of said County
	ordinary of said County, ify that I am well acquainted with These le Redeurs the
ppiica	ant in the foregoing affidavit, and am well satisfied that the statements made by him
u 1118	said affidavit are true, and I know he is the individual he represents himself to be
uu tn	at he resides in this County.
	Given under my official signature and seal, this
Affin	day of
bere.	morries
	Ordinary FULTON County
Na	Ordinary County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1



e sistem Cont					
WIDOW'S	Jan John			remit the same Witness	STATE 1,
Indigent Pension.	111 6		25	my hand thin	OF GEORG
County Bulton Wiley & 44-12	And the second s		Ordinary, County.	County, to receive a	County.
JOHN W. LINDSEY, Commissioner & P				nd receipt for the pe- by his check or region	
		X		naion allowed and the terred mail.	
		A STATE OF THE STA	·	*	

STATE OF GEORGIA. _ County County. avail benefit of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, following questions, deposed and answers as follows: ....of said State and County, desiring to hereby authorize .County, to receive and receipt for the pension allowed and that he 1. What is your name and where do you reside? (Give State, County and Post Office.) remit the same to me at..... by his check or registered mail. 2. How long and since when have you been a resident of this State? Witness my hand this ......day of When and where were you born? May 12th 1845. un Newton Correctly Executed in presence of 4. When and where was your husband born-state his full name, and when were you and he married? Sugart 15th 1841, in Kenny County George a. James Mich to Dily, It 1861 May 19 1 5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? July 1867, Me Dancingh Ga. Correspond 9, 44 to 6. SEAL 6. How long did your husband serve in said Company and Regiment? Field Survice Will May 20 1863, Brown dad vin Lefte hand, hur fortal have a to an income.

7. When and where did your husband's Company and Regiment surrender and was discharged? A showed as Company home down of Affective after a first acceptance on hard to take 8. Was your husband present at the time and place when his Company and Regiment surrendered? The was mining brief and moundered in her hit of the black 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? Afren he migs disabled by womend in from de from pribale surviver, has green destricted on with of morring and was of Brichman de Sh surren um 10. When and where did your husband die? At Lishous's fearers any James 2 mid 1891 11. Which of the following grounds do you base your application for Pension-viz: First-Age and Poverty; Second-Infirmity and Poverty, or Third-Blindness and Poverty?_ 12. If upon the 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. Having a dir offer hant and, and defermed frally children to suffer museum ably by my own effects, I became from don't 18. What has been your occupation since your husband's death? greathing, sowing, and when light words 16. What property, real or personal, or income do you have or possess, and its gross value?

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? 17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation? 18. How have you been supported since death of husband, and especially for 1899 and 1906. By my one endeason, frall earning by reving, gu 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 delphone some 80 on 35" about 215 on 26 20. What was your employment during 1899 and 1900—how much did you receive for each year? rang, greatlest age somall picks, Ash & sanding 15:40 20 21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property? 22. Have you ever made an application for pension before? Man of 5. Ph. 1900 23. How many applications have you made for a Pension, and under what class? midere francis Miles, Julia ann Ril

UDURGIA.

Tillen County,	27. Now was she supported for 1899 and 1900?
m Mouth I mad Total of said State and County, having	28. How much did applicant contribute to her support for last two years?
been presented as a witness in support of the Application of Mrs.	29. Give a full and complete statement of applicant's physical condition?
for a Pension under the Act of OCL 1900, and after having been duly sworn true answers to make to the	
following questions, deposes and answers as follows:	manufacture and the second
1. What is your name and where do you reside? A. Mr. Sonth. Herry Co. for Mr. Sonth. Herry Co. for Mr. J. Co. for Siley ges.  2. Are you acquainted with the applicant, Mrs. J. Cia. Co. Siley ges.  If so, how long have you known her? Leefort Sh. mazised  3. Where does she reside, and how long and since when has shy been a resident of this State?	30. What interest have you in the recovery of this pension by the applicant?
2. Are you acquainted with the applicant, Mrs. Julia Co Riley ges	Sworn to and subscribed before me this.
If so, how long have you known her? before 5h married	day of Conth
3. Where does she reside, and how long and since when has she been a resident of this State?	
Atlanta She has bin in this Monte all y has	Hand will williary, Ull. D. Ford
4. When, and where was she born? The was been alle 12 1845	Witnesses.
5. Were you ever acquainted with her husband?	
6. Where did he reside in 1861? Henry bo. Ga	Vetidavita of Di
7. When and to whom was he married Wiss Juley Proffert .	Affidavits of Physicians.
8. When and where was he born? Letting 60 gar	STATE OF GRORGIA
9. How long have you known him Ritty att of my till at of	7 Fully
7. When and to whom was he married this Jules Droffeit.  8. When and where was he born? Henry to Jules Droffeit.  9. How long have you known him? Wish all of my life 40 years.  10. When and where diff Reary to Ja enlist in the war between the States, and in what Company and Regiment did be enlist and how do you know this? Company J. 44	Personally before me, comes & Aal
we saw him exclist. 1862.	
11. Were you a member of the same Company and Regiment? www. was	physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mra.
	applicant for a Pension under Act of 1900 and after
12. How long did the perform regular military dury? 14 format ell Wom The	applicant for a Pension under Act of 1900, and after
the state of the s	attacked homes protection du ste
13. When and where was his Company and Regiment surrendered and discharged from sarvice?	appresent for a Pension under Act of 1900, and after appreciant for a Pension under Act of 1900, and after action personal examination say that her physical condition is this that she has a few actions and grown provided with the same and grown provided washing Conditional washing Conditional washing Conditional washing Conditional Conditio
13 Company was taken for which it house that beard in the willder	
14. Were you with the command when it surrendered?	and we have no interest in said pension if allowed
15. Was and was home on partite the husband of applicant present	Sworn to and subscribed before me this
was not beards detail as mas at Bickinion hasfittle	
16. If not present, where was he? cat Rechange	day of agriculture 190/
For what cause? or the count of thing monded	John & Welling ordinary, John III
For what cause! or the court of stans mount ed	Fullen Court
By whose authority be left? he come home on fartow wounded	Outry./
How do you know all this? (State fully and clearly.) set know by our one	ORDINARY'S CERTIFICATE.
	NSTATE OF GEORGIA,
18. When and where did at Lithorisa Da That of June 189 die?	}
the history	County.)
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? and all	I,Ordinary in and for said county, hereby
at Talkonia 70. he lies at resident ever since	certify that the applicant, Mrs.
20. Do you of your own knowledge know that applicant is the lawful widow of well to	county, and has been a bona fide resident of this State sinceday of
	18, and that the witnesses, Mr.
21. His one remained numerical sines her soldier husband's death, and is now his widow? She hand	are of trustworthy character, and that their statements
married since her hast and death and his widow & MIN	I do further certify that before answering the forecasts asset in it.
22. What property, effects or income has the applicant, if any, and how do you know this of your	proofficent and the full text of the amidavita was read to the amiliant and mitmans.
own knowledge?	ions signed and subscribed.
23. What property offerds or income did anythrough the second sec	I further certify that the tax diges of
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it?	of property, and in 1900
man of the	
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to	Witness my hand and official seal, thisday of190
whom?	(SEAL)
The second secon	County
25. What is applicant's physical condition and her chances and ability to care a support?	Norme—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 wideness 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.
and the state of t	and the evidence you shall give will be the whole truth; So help you God."
	3. All affidavits must be made before Ordinary.
A CALLED TO A CALL	4. Only widows who were the wives of the dead instance while they were soldiers need apply—and are now widows. Those maried since 26th April, 1605, not entitled.  Witness and the day of the dead in the control of the dead in the dead

* 11.71

STATE OF GEORGIA, CIUNO	
County.	1 27. How was the supported for 1869 and 1900? By Ale Son and Vertal
	well an aca ty to oke our labor
been presented as a witness in support of the Application of Mrs.	28. How much did applicant contribute to her support for last two years? Approx \$2.5
for a Pension under the Act of 1900, and after having been dult	29. Give a full and complete statement of applicant's physical condition?
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:	of this the layout a month of the test interest that the test of t
1. What is your name and where do you reside?	30. What imposed how worlds the
	80. Wast interest have you in the recovery of this pension by the applicant? have
2. Are you acquainted with the applicant, Mrs.	Sworn to and subscribed before me this 13
If so, how long have you known her?	day of Gypril 100/
3. Where does she reside, and how long and since when has she been a resident of this State?	day of Alexander 190
and since when has she been a resident of this State ?	John A Williams of the Poly is as
4. When and where was she born?	7.111
5. Were you ever acquainted with her husband?	County
6. Where did he reside in 1861?	Affidavits of Physicians.
7. When and to whom was he married?	Andavits of Thysicians.
8. When and where was he born?	STATE OF GEORGIA,
to the state of th	County
10. When and where did	Personally before me comes
the States, and in what Company and Regiment did he enlist and how do you know, this?	and
11. Were you a member of the same Company and Regiment ?	physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs.
12. How long did he perform regular military duty?	such personal examination say that her physical condition is this
10 17	
13. When and where was his Company and Regiment surrendered and discharged from service?	
The state of the s	The state of the s
14. Were you with the command when it surrendered?	and we have no interest in said pansion if allowed.
15. Wasthe husband of applicant present?	Swort to and subscribed before me this
	day of190
16. If not present, where was he?	
17. When and where did he leave his Command?	Ordinary,
for what cause?	County
By whose authority he left?	
How do you know all this? (State fully and clearly.)	ORDINARY'S CERTIFICATE.
	STATE OF GEORGIA,
	7 . 0
18. When and where diddie?	JOCAL Cy.
	I, John R William, Ordinary in and for said county, hereby
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?	The state of the s
	county, and has been a bona fide resident of this State since
20. Do you of your own knowledge know that applicant is the lawful widow of	10- and that the witnesses, Mr. James Rise
21. Has she remained unmarried since her soldier husband's death, and is now his widow?	entitled to full faith and credit.
	I do further certify that before answering the foregoing questions, the applicant and said witnesses took the certify prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was samed and subarried.
22. What property, effects or income has the applicant, if any, and how do you know of of your	was signed and subscribed.
WI Knowledge !	I further sertify that the tax digest of county shows that applicant
M 01076 Carlo Parallella and area area and the same and area area.	returned for taxation in her own name in 1899
23. What property, effects or income did applicant possess in 1890 and 1909 and sofat dispetition did she	of property, and in 1900 dollars worth of property.
ake of it? The aco not own any property	Witness my hand and official seal, this day of the day
take of it? The ded not own any forful	1907
24. Has applicant conveyed any property in last two years or given any away of so what you is	SEAL Ordinary,
hom? I had not cirulled an forker	Table -
non hat the girth lain about	Edges-1. Before any quantions are answered, the Ordinary shall owner applicant and the witnessed at a fine
25. What is configure's physical condition and has charges and Auto-	and the evidence you mail give will be the whole truth; so help you God,
An is not able to make a willer	All addaying much be made notices Ordinary.
The second of th	down. These married since with April 100 pass while they were soldiers need apply—and are now

STATE OF GEORGIA, County. , hereby authorize to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereof, I have hereunto set my hand and seai, this day of [L. S.] Executed in presence of

... ...... CUWER OF ATTORNEY STATE OF GEORGIA. , hereby authorize to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereof, I have hereunto set my hand and seal, this.____ WARRANT ISSUED

Walter or otterwest ?

FOR INDICENT WIDOWS HERETOPORE ALLOWED PERSIONS.

Vouchers and affidavite

#### LAW TURISDUL MINGAR HEKRICKOKR YFFOMED BENSIOKS

	OF GEOR		(	PERSONALL	у сомив Мив.	
County o	Fulto	n.	- Sale	in am	· Riles	,
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					esident of said	
continuously e	ver since	Birth	or cleargia,			
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8	1 44	To The			was a soldier in	Comp
Voluntaena the	t he called a t		Regi	ment of	fa .	
198 2	at he enlisted in se erved in the Arm	aid regiment on	or about the	month of	diely	**************
	49 4	y up to	ay 2		_186_3_ Th	at he d
on the	ma	day of	house	18.91		
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ne year 18 6/		narried since h	is death sfor		t she became hi	s wife
I have been	en allowed an Indi	narried since h	is death afor	esaid, and tha	t she became hi	s wife
I have becounty, under A	en allowed an Indi	narried since h	is death afor	esaid, and tha	t she became hi	s wife
I have been punty, under A	en allowed an Indi act 1900, for the year	igent pension as	is death afor	esaid, and tha	t she became hi	s wife
I have been punty, under A car ending Dec	en allowed an Indi act 1900, for the ye ember 81, 1908. and subscribed b	gent pension as ear 1903, and no	a resident of	the pension p	provided by law	s wife
I have been punty, under A car ending Dec	en allowed an Indi act 1900, for the year	igent pension as ear 1903, and no before me,	is death afor	the pension p	t she became hi	s wife
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I have been punty, under A par ending Dec Sworn to	en allowed an Indiact 1900, for the year member 81, 1908. and subscribed by of JAN 22 in the	igent pension as ear 1903, and no before me,	a resident of ow apply for Post-Office	the pension p	provided by law	s wife
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I have been punty, under A par ending Dec Sworn to day tate of Ge	en allowed an Indiact 1900, for the year the sember 81, 1908, and subscribed by of JAN 22 1	igent pension as ear 1903, and no perfore me, 1905. 1908. Ordinary.	is death aforms a resident of ow apply for Post-Office	the pension p	provided by law	for t
I have been unty, under A sar ending Dec Sworn to day tate of Ge	en allowed an Indiact 1900, for the yellowed and subscribed by of JAN 22 learners.	igent pension as ear 1903, and no before me, 1908. Ordinary.	a resident of ow apply for Post-Office	the pension p	provided by law	for t
I have been punty, under A car ending Dec Sworn to day tate of Ge	en allowed an Indiact 1900, for the year the sentent 81, 1908, and subscribed by of JAN 22 1 LANGES.  Corgia,  Titon.  Mra. Sulia	igent pension as ear 1903, and no perfore me, 150 1908. Ordinary.	a resident of ow apply for Post-Office	the pension p	provided by law	for the same were as a same were as a same were a same were as a same were as a same were
I have been punty, under A sar ending Dec Sworn to da tate of Ge	en allowed an Indiact 1900, for the year more 31, 1908. and subscribed by of JAN 22 1  LALLIAND.  Corgia,  Titon.  Mra. Julia.	gent pension as ear 1908, and no perfore me, 1908. Ordinary. County.	es resident of ow apply for Post-Office	the pension particle of the pe	provided by law	for the same were as a same were as a same were a same were as a same were as a same were
I have been unity, under A sar ending Dec Sworn to day tate of Ge quainted with a satisfied that reelf to be, and	en allowed an Indiact 1900, for the year st., 1908. and subscribed by of JAN 22 in JAN	gent pension as ear 1908, and no perfore me, 1908. Ordinary. County.	es resident of ow apply for Post-Office	the pension particle of the pe	provided by law	for the same were as a same were as a same were a same were as a same were as a same were
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I have been ounty, under A sar ending Dec Sworn to day tate of Ge quainted with a satisfied that reelf to be, and	en allowed an Indiact 1900, for the yellow the state of t	perfore me, 156 1908. Ordinary. County. County. Stated are true tinuously reside.	Post-Office Ordinary of the state of the	the pension particle of said County who made is the indice the	provided by law	for t
I have been ounty, under A sar ending Dec Sworn to day tate of Ge quainted with a satisfied that reelf to be, and	en allowed an Indiact 1900, for the yellow the state of t	perfore me, 156 1908. Ordinary. County. County. Stated are true tinuously reside.	Post-Office Ordinary of the state of the	the pension part of said County who made is the indeed the since the day of	provided by law  Air Rul  (auth  (cortify that I the above affida  lividual she rep	for t
I have been unty, under A car ending Dec Sworn to day tate of Georgian and the cartest of the ca	en allowed an Indiact 1900, for the yellow the state of t	perfore me, 156 1908. Ordinary. County. County. Stated are true tinuously reside.	Post-Office Ordinary of the state of the	the pension particle of said County who made is the indice the	provided by law  Air Rul  (auth  (cortify that I the above affida  lividual she rep	for t

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.[L. B.]
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3	Par Pai		Z		For year ending Dec. 31, 1905.	B	ථි	7. Ch	SEY,	ner of Pension	27	PH Commerce Co. Attacked Co. At
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372	70 H	No		OW.	year end	ullip	Ë.	14 th	JOHN W. LINDSEY		WARKA	AND H
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 	MUNITALAND	VITAMEN	PRUSIONS.
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STATE OF GEORGIA, PERSONALLY COMES MES
County of Fulton. Personally comes Mrs.
Rulton. State of Georgia, and that she has RESIDED in said State of County of Countinuously eyer since
That she is the Widow of the Harman Pool who was soldier in Company
Volunteers, that he enlisted in said regiment on or about the month of Acas Say
Thounded, may 1860. In Hospital 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 184/
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.
Swern to and subscribed before me, this day of JAN 2 1905 1906. }
John Alle Sisson Sordinary. Post-Office 175 Hyly Sh-
State of Georgia,  County,  Ordinary County
acquainted with Mrs. Jelia a Willy who made the most of the state of t
set that the facts therein stated are true, and I know she is the individual
herself to be, and that she has continuously resided in this State since the
Given under my official signature and seal, this fineday ofJAN 2 1905
Official Soal.
Ordinary of 111ton. County

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 1905.

## POWER OF ATTORNEY.

STATE OF GEORGIA,					7
Coun	ITY.		(† : -		- (
Ι,				, hereby	authorize
to receive and receipt for the pension paid	hereon, and	request	that 1	he remit	
In Wilness Whereof, I have hereunto					
day of1900		,			
Executed in presence of	***************************************			1	[L. s.]

## POWER OF ATTORNEY

STATE	OF GEORGIA,	Count	<u>,</u> }	1		
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o receive	and receipt for the	pension paid	hereon,	and request	that	he remit same to
/n ny of	Witness Whereof, I	have hereunto	set my	hand and se	al, this	
	Executed in presen	ice of	1			[L. s.

To Those Heretofore

To Those Heretasone Paid.

To Those Heretasone Paid.

TO Those Heretasone Paid.

TO Those Heretasone Paid.

No. 6

TO Those Heretasone Paid.

No. 6

William.

Or C. William.

JOHN W. LINDSEY,

Commissioner of Fancion.

AS HE ELOLORS APPOARS LOUGHA

E ATHERE WILLIAM STEELS TO SEE

### FOR INDIGENT WIDOWS HERETOPORE ALLOWED PERSIONS.

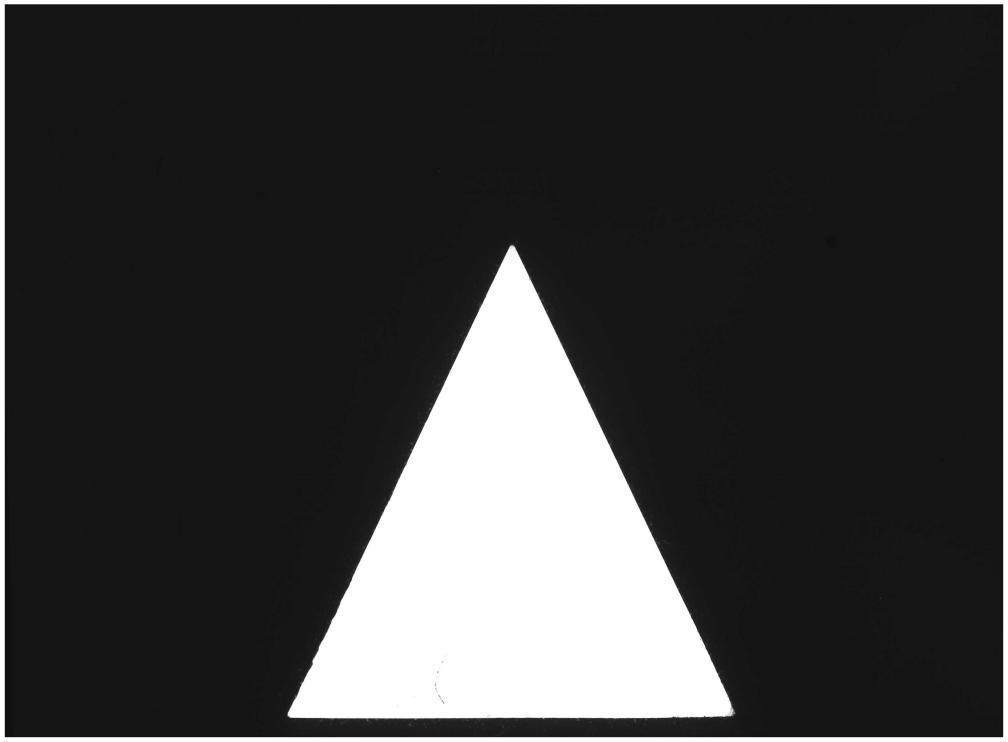
STATE OF GEORGIA, County of Fulton.
who, being sworn says on oath, that she is a bona fide resident of said County of Georgia, and that she has musmum in said State
continuously ever since That she is the Widow of who was soldier in Company
Volunteers, that he enlisted in said regiment on or about the mouth of
186, and served in the Army up to Mt. Mospital 186 That he died on
theday of
endermite and barret
soldier, and that she has never married since his death aforesaid, and that she became his wife in
I have been allowed an Indigent pension as a resident of F11110n.
I have been allowed an Indigent pension as a resident of F111101.  County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906
I have been allowed an Indigent pension as a resident of F111ton.  County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906.  Sworn to and subscribed before me
I have been allowed an Indigent pension as a resident of F111ton.  County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906.
I have been allowed an Indigent pension as a resident of F111ton.  County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906.  Sworn to and subscribed before me day of JAN 1 1906.  Post Office  State of Georgia,
I have been allowed an Indigent pension as a resident of F111ton.  County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906.  Sworn to and subscribed before me day of JAN! 1906.  Post Office  State of Georgia,  Filton.  County.  Ordinary assid County, sersity that I am well acquainted with Mrs. Julia Alley, who made the above affidavit, and
I have been allowed an Indigent pension as a resident of F111con.  County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906.  Sworn to and subscribed before me this day of JAN 1 1906.  State of Georgia,  Post Office  County.  Ordinary of said County, serving that I am well acquainted with Mrs.  County.  Ordinary of said County, serving that I am well am satisfied that the facts therein stated are true, and I know she is the individual she represents
I have been allowed an Indigent pension as a resident of Filton.  County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906.  Sworn to and subscribed before me this day of JAN 1 1906.  Post Office  State of Georgia,  Filton.  County.  Ordinary of said County, territy that I am well acquainted with Mrs.  County.  Ordinary of said County, territy that I am well am satisfied that the facts therein stated are true, and I know she is the individual she represents the perself to be, and that she has continuously resided in this State since the
I have been allowed an Indigent pension as a resident of F111ton.  County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906.  Sworn to and subscribed before me have any of JAN! 1906.  State of Georgia, Post Office  State of Georgia, County. Ordinary of said County, tensity that I am well acquainted with Mrs. County, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents the said of
I have been allowed an Indigent pension as a resident of Filton.  County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906.  Sworn to and subscribed before me this day of JAN 1 1906.  Post Office  State of Georgia,  Filton.  County.  Ordinary of said County, territy that I am well acquainted with Mrs.  County.  Ordinary of said County, territy that I am well am satisfied that the facts therein stated are true, and I know she is the individual she represents the perself to be, and that she has continuously resided in this State since the

## FUR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	* * * * * * * * * * * * * * * * * * *	1 11.	NALLY COMES	
who, being aworn say	on oath, that	ahe is a bona fic	le resident of a	d County o
			e has resided in	
continuously ever since	gen, Kik	ę .	That she is th	e Widow o
- James Mich	uy	who	was a soldier	in Company
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186 , and served in the Army up to.	IN HOS	eital	186 J. The	t he died or
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soldier, and that she has never married s				
the year 18 dess.	moe mis destn	atoresaid, and t	hat she became	his wife in
I have been allowed an Indigent pen	1		TO 14	
County, under Act 1900, for the year 1906	, and now appl	y for the pensi	on provided by	law for the
year ending December 31, 1907.				
Sworn to and subscribed before a	1	o .	0 0	
this day of JAN 2 190	07.	Xulia	14. 161	ly
John R. Willinson, Ordinar	y. Post C	ffice 175'	Mylie	51
State of Georgia.	· ·	I for	in R. Wi	lkinson
Translation 1	1	17		_
. // / . /	Ordin	ary of said Cou	inty, certify that	I am well
acquainted with Mrs. Mula U	, vivey	, who ma	de the above aff	davit, and
am satisfied that the facts therein stated ar	e true, and a k	now she is the	individual she	epresents
herself to be, and that she has continuously	resided in this	State since th	е	
day of18				
Given under my official signature and	seal, this the	day of	JAN 2-	. 1007
Official Seal			Wilkenson.	
A STANFACTOR	Ordinary of_	F11	lton	County.
NOTE.—All blanks must be filled Vouchers and Affidavite u	wet bear date	after, Januar	y let, 1907.	

JUDGE COURT OF ORDINARY. FULTON COUNTY. Allanta, Ga. July 31 st 1901 This certifies that we der my mornillian and mrs. L.C. Lawhow both of Julion Ca. la. enere present at the marriage of James. M. Riley and Julia ann Proffit his DeKalh Rounty In, May 19th 1861, and witnessed the mamaged - Reve Elija Morris performed the reremony- and further testify that Mrs. Julia Com Riley has not married suice the death of her husband James m Riley who died June 2nd 1891. Sworm to o sudion bed before me July 3, en 1909. , ens en 9 Mimillian. John ReWilkerson Jakon & & Southon Ordinary

JOHN R. WILKINSON, ORDINARY



Ring, M.a.					
SOLDIER'S PENSION.		STATC	Com.		applicant in the and stiffacts are individual to re- Green under
POR THE YEAR ENDING OCTOBER 26, 1809.					foregoing affidavi true, and that he pesents himself to r my official signa
Name Det Ring County Fuller Disability Joi Ley				Ordinary_	davit, and am well satisfact to to the set disabled, to to the and that he re signature and seal, this
Amount, \$ 5.00 Entered on records  1892.				Buch	shed that the state he extent he dain sides in this county
W. H. HARRISON  Berriary of Baseline Department.  ACRESSITE  ACRESSITE  ACRESSITE  ACRESSITE  ACRESSITE  ACRESSITE  ACRESITE  ACRES  AC	Andreas de la constitución de la	70			ments made by h

STATE OF GEORGIA.

27. 6. 10 as

STATE OF GEORGIA, m. L. Le altum do certify that I am well acquainted with... applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he repesents himself to be, and that he resides in this county. Given under my official signature and seal, this Ji day of My County. PENSION. SOLDIER'S

#### POWER OF ATTORNEY

	of Miloknell.
STATE OF GEORGIA,	. )
Coun	
Know all Men by these Presents. The	int I,
2.41	of
County, State of Georgia do hereby appoint	t
of	my true and lawful attorney in fact,
States (or of this State), as stated in the	for whatever amount of money I may be entitled to from the event as a foresaid in the military service of the Confederate foregoing affidavit; hereby authorizing my said Attention that may be issued by the Governor, or for any sum of monforesaid.
day of	nereunto set my hand and seal, this.
Executed in the presence of us	
•	<b>)</b>
	))
	•
DII	DECELONG
Send money to me as follows, by	RECTIONS.
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Co	ounty, Georgia.
the state of the s	
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Soldier's Pepsion.

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W. H. HARRISON.

Berdury Executive Department.

WARRANT HANDED TO

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For Applicants Amelican Astronomy Ber

PERSONAL	Hullow Count	y. )	Market Committee	
	LLY appears & an		Pine	San West
of	fuelon	County, State of Geor	gia, who, being duly sworn	
on oath that he	e is a <i>bona fide</i> citizen and	resident of Georgia.	and has been such contin	, says
since the	day of			
in the military	service of the Confederate	States (or of the San	1840; that he en	ilisted
during the war	between the States, and s	erved as a		
	Regiment of 8		The Transfer of the Committee of the Com	-
rationade that w	whilst engaged in such mili	Volunt	ers Garage	's
in the Ctate of	villat engaged in such mili	tary service at the bat	le of Sharpisa	-
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the acts amenda	itory thereof and makes a	benefits of the Act, a	pproved October 24, 1887 wance to which he is entitle	, and
the year ending	October 26, 1892. I have	e heretofore been allow	wance to which he is entitle wed a pension of	d for
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	nd subscribed before me	his the )		
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	ay of Meant		7	,*
on 6,	Gachino	dinary.	V	
Nora.—State fu extent of the disabilit	illy nature of wound or character	of disease which causes th	e disability, and explain particular	de the
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	POWERC	F ATTO	NEY.	
STATE	OF GEORGIA.	)		
		}		
<b>T</b>	County	,		
Know all M	Ien by these Presents,	That I,		
	Annual Company of the	of	/	
County, in said S	State, do hereby appoint			
		mar terre	and lawful attorney in fact,	3.44
of			and lawful attorney in fact.	
me and in my n	ame, to receive and receip	of whatever amoun	t of money I may be entitle	d to
me and in my n	ame, to receive and receip Georgia by reason of the States (or of this State)	of whatever amoun	t of money I may be entitle	d to
me and in my n	ame, to receive and receip Georgia by reason of the States (or of this State), a to receipt in my name for	of whatever amoun	t of money I may be entitle	d to
of ne and in my no rom the State of he Confederate S ny said attorney or for any sum of	States (or of this State), a to receipt in my name for money which may be con	s stated in the foregoi any Warrant that manifest on the ree	t of money I may be entitle bresaid in the military service ng affidayit; hereby authori ay be issued by the Gover	d to
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## For Applicants Heretofore Allowed Pensions.

STATE C	F GEORGIA	A. 1
Fult on	Cour	.,, ì

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Personally appears	David A.Ring of	Fulten
County, State of Georgia who he	ing dule amount	
County, State of Georgia, who, be	ing duly sworn, says on o	ath that he is a bona fide citizen
and resident of said State, and ha	s resided therein continu	ouels and t
day of 18	the continu	ously ever since the
, (0)	40; that he enlisted in the	he military service of the Con-
federate States (or of the State of	-	
O		) during the war between the
States, and served as a	Private in Con	manu = C . I B .
of South CarolinaVolunteers	Private in Con	ipany n, of 13 th Regiment
or our our of The offineers	's B	rigade; that whilst engaged in
such military service at the battle	of m	garay that whilst engaged in
C	Sharpahurg	in the State
of Maryland , on the	17th day of	Santamba. 100 F.
wounded as follows: -b-22	arwi may or	nal campar 186 3, he was
wounded as follows: shell were	und of left thigh to	deelf edt vawa gnira
and expessing the bene la	md mm Index Ad a street	
Total State of the	mine or senancin	ug all the time and men-
dering his left leg subs	tantially and esser	tially useless
6		- 1 months (months 4 months)

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 189 3 Sworn to and subscribed before me, this, the 2th day of Harch 1894.

Mr. L. Lo alhum Colliday

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 W. L. Ca Phoun

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

Given under my official signature and seal, this

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# For Applicants leresofore Allowed Pensions state of Georgia.

01		l signature and seal	County Carl	f Georgia, do h	ereby appo
for any su	perate States (or of	reason of the injured this State), as state this State), as state may be coming to see the state of the state	y received se aford in the foregoir warming that his me for the reason	g affidavit; here y de lifetied by the a sforesaid.	be entitled prypagatice by authorizing Governor,
said affide	way o	to be and that he	resides in this (	ounty.	and the second
al h <b>Rosen</b> u	tedric the bresitne	hal he is disabled, to	the extent he ch	tims, a d I know	be is the
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CO COLLING	that I am well acq	uainted with	J. 1.	1. A. Hitry.	
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LEEDAN	ALLY appears	The state of the s	· · · · · · · · · · · · · · · · · · ·	the land hand the	de sittannand
Dancon		Devid A.	Cine of	Wul'or	
CASA CASA	CO* CIN	County, )		Contract Contract	John L. R.
William	Committee of the second	THE RESERVE OF THE PARTY OF THE	with the same of the same	A CONTRACTOR OF THE PROPERTY O	J. 182784

STATE OF GEORGIA;

	OF GEOF	(GIA, )		red Pensions	
	Ful*on	County,	S. S.		4
PERSONA	LLY appears	David A	Rine		
County, State	e of Georgia, who	o. being duly among	Carrier office of		•
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The second secon	A mm. diameter are detted	- OI		during the war have	1
States, and se	rved as a	Private			
or soush	Sarolina Vo				BOOK
	ryland on		<b>新版公司集功以</b>	100	LUNG.
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{+}	100	100	,		<u> </u>
Deponent	desires to pratic	inate in the limbs		oved October 24th, 188 e to which he is entitle a pension of	
the acts amend	atory thereof, an	d makes application	for the allowers	wed October 24th, 188	7, ar
the year ending	g October 26, 28	93. I have hereto	ore been allowed	a pension of	d fo
	Fire	dollars	for 1892	7	***********
Sworn to		fore me, this, the	1-1)	1 19	*******
16	day of	arak 1893. \$	A Committee of the Comm	- Laug	*************************
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		which is the second	in the meanuty, and	englain particularly the extent	of th
STATE O	F GEORG	IA.		1 . 1	
Send words	Pulton Co	menty.			
1.		ounty.	, M.		
4		E. 2.40 \	er no un	Ordinary of said Co	unty
do certify that I	am well acquain	ted with	David A	Ring	_the
pplicant in the	foregoing affidav	it, and am well sati	sfied that the state	ments made by him is	n hte
said affidavit are	true, and that h	e is disabled to the	arriant he status	and I know he is th	a an
dividual he repr	many of an	be, and that he resi	1903	and I know he is th	e in-
	TOTAL COM	oe, and that he rest	tenuty	· loved and supply t	
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e sul further con	Gregoing affile	be coming to made	and the ready we re	while the committee	
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Considerate Section the service any author designation of the service of the serv	cates for or this	State), as ataloc in majorita	and power of a	and the said affidavis	and
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No. 129

1895.

1895.
RICHARD JOHNSON,
Scordary Executive Department.

WARRANT HANDED TO

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HE REPORTED Allowed Pensions.

#### POWER OF ATTORNEY.

STATE OF G	EORGIA,	, }	•			
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		of_	***************************************			
to receive and r	receipt for the	pension	paid	hereon by	and	request that he remit same to
at				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
				nto set	шу	hand and seal, this
day of	The state of the state of		_1896.			
				***************************************	***************************************	[t. s.]
Execute	ed in presence o	f us	)			
TO Marrie - Comment of the Comment o	B		_		*	
	The state of the s	prose-120,000 mage-1100.000	)			

Many 20 A.  M. Co. 100 Already Envoled.)  No. 334  No. 334  SOLDIER'S PENSION.	Name Partis A.Ring  County Fulton  Disability Disabled leg  Amount, \$50  Amount, \$50  RICHARD JOHNSON,  Secretary Executive Department  WARRANT HANDED TO  WARRANT HANDED TO  The Control of the County State Printer, Admin.
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STATE OF GEORGIA.

For Applicants Heretofore Allowed Pensions

## For Applicants Heretofore Allowed Pensions.

11				T AMPIAND.
STATE O	F GEORGIA,	, }		
₽ult	Cou	nty.∫		
Personally	appears David A	.Ring	of	Fulton .
nd resident of sa	Georgia, who being du	led therein conti	nuously ever	nimes the
tates, and served	r8 40. of the State of	ate :	during	the war between t
ich military servi	ce at the battle of	Sharnshu	rg	in the Can
Mary Taul	on the 17ts: shell wound of	day of	Septem	ber -oc 3
d exposing th	e bone laming him-	disabanaina	11 41	dy the flesh
s left leg su	extantially and es	sentially use	less	e and rendering
				A
More-State fully the p	subscribed before me, of March Llum On suture of wound or character of om the wound or disease.	1895.		rplain particularly the exten
TATE OF	GEORGIA,	)		
Fulton	Coun	ty. J		
I,	W.L.Calhoun		Ordi	nom. of!1 O
certify that I am	well acquainted with	David	A.Ring	nary of said County
plicant in the for	egoing affidavit, and a	m well satisfied	that the stat	ements made by b!
his said affidavit	are true, and I know	he is the indivi	dual he rep	esents himself to be
that he resides	in this County.			
	Given under my	official signatur	e and seal, ti	his 8
	day of March	1895.	,	
Affix your seal here.	my	Eleal	hm	
	TOWER OF	Ordinary	Pult	on County.
	*			. /:

# For Applicants Heretofore Allowed Pensions.

STATE OF	GEORGIA.
Fulton	Count

Personally				
M. a a marriage E.	appears_	David A.Ring	of	Fulton
County, State of	Jeorgia, wi	to being duly sworn	. save on oath thet	he is a bona fide citizen
come sausment of Bill	na otste, s	na nam resided thew	nin namblestantin nie	
any or many many miningen	affinementation of the	that he e	althus and out bataile	ame as
federate States (or	of the Stat	te of	) Aus	ing the war between the
States, and served of South Carol			in Company	D of 13th Partment
in such military s	ervice in t	he State of Wart	land ,	e; that whilst engaged on the 17th day
shell wound of	left thi	ight tearing awa	y the flesh and	on the day l as follows: exposing the bone la
centially usel	ess.		LING WIS TOLL TO	og substantially and
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	tr.	. N		
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	all to soul			201 - 2 17 19800
Deponent desi	res to newt	inimata i il. 1 c		The state of the s
nd the sets smear	les to part	cipate in the benen	ts of the Act, appro	ved October 24th, 1887,
nd the acts amend	intory there	eor, and makes app	lication for the po	ension to which he is
Fulton	ear ending	g October 26th, 18	96. I have heret	ofore as a resident of
	count	ty been allowed a per	sion of Fif	ty /
ollars, for the year			0 ~	161
Sworn to and s	subscribed 1	before me, this, the		X/ / / ' '
169 day		1896.	-A	1. July
may	1 - 01	1000.	).	1
U/Yn A	oug	man Ood	,	
Norm State fulls the -	asure of wound		causes the disability, and	
Nors-State fully the n the disability, resulting for	om the wound	or character of disease which		explain panticularly the extent
Norn—State fully the n the disability, resulting fr	om the wound	or character of disease which		explain panticularly the extent
				explain panticularly the extent
	GEOF	RGIA,		explain particularly the extent
TATE OF	GEOF			explain panticularly the extent
TATE OF	GEOF	RGIA,		
TATE OF Fulton	GEOF Co	RGIA, )	Ord	inary of said County,
TATE OF Fulton  I, #.L.6al certify that I am	GEOF Co	RGIA, ) ounty.	Ord David A.	inary of said County,
Fulton  I, **L.6a  certify that I am plicant in the fore	GEOF Collingua  well acquainegoing affid	RGIA, COUNTY.	Ord David A.	inary of said County,
Fulton  I, 8.L.82 certify that I amplicant in the forehis said affidavit	GEOF  Lhoun  well acquai egoing affid are true, an	RGIA, OUNTY.  nted with lavit, and am well se	Ord David A.	inary of said County,
Fulton  I, 8.L.82 certify that I amplicant in the forehis said affidavit	GEOF Colhoun well acquai egoing affid are true, an in this Cou	nted with_ lavit, and am well as ad I know he is the nty.	Ord DEF1d A.  atisfied that the sta	inary of said County, Ring the tements made by him resents himself to be
Fulton  I, 8.L.62 certify that I amplicant in the forehis said affidavit of that he resides in	GEOF  Co  Lhoun  well acquai egoing affid are true, an in this Cou  Given u	RGIA, OUNTY.  nted with lavit, and am well se	Ord DEF1d A.  atisfied that the sta	inary of said County, Ring the tements made by him resents himself to be
I, R.L.Ca. certify that I am plicant in the fore his said affidavit; d that he resides i	GEOF  Colhoun  well acquai egoing affid are true, an in this Cou Given u	nted with lavit, and am well so it is the nty.	Ord  Devid A.  atisfied that the sta individual he rep	inary of said County, Ring the tements made by him resents himself to be
Fulton  I, 8.L.62 certify that I am oplicant in the fore his said affidavit of that he resides is	GEOF  Colhoun  well acquai egoing affid are true, an in this Cou Given u	nted with lavit, and am well so it is the nty.	Ord  Devid A.  atisfied that the sta individual he rep	inary of said County, Ring the tements made by him resents himself to be

POWER OF ATTORNEY. STATE OF GEORGIA, STATE OF GEORGIA, County, Ι,..... hereby authorize..... I,_____hereby authorize____ to receive and receipt for the pension paid hereon and request that he remit same to to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1897. day of____ [L. S.] Executed in presence of [L. S.] Executed in presence of RICHARD JOHNSON, SOLDIER'S PEN RICHARD JOHNSON

. OWER OF ALTURNEY.

For Applicants Heretofore Allowed Pensions.	For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,	STATE OF GEORGIA,
Putton County.	Julian County,
	personally appears David a. Ping of Full 3
personally appears Saved A ling of Pulton	County, State of Georgia, who being duly sworn, says on out that he is a life 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	said State, and has resided therein continuously ever since the
day of 1840; that he collisted in the military service of the Con-	1840; that he enlisted in the military service of the
rederate States (or of the State of	states and served as a state of
States, and served as a fin valle in Company of 13 th Programmer	States, and served as a full of the Company of 3th Regiment
Volunteers	of S. Volunteers, Sugge 's Brigade; that whilst engaged in such military service in the State of Mary Land, on the 17 day day
in such military service in the State of Maryland, on the / day of 1862, he was wounded injured or diseased as follows:	of Sept - 1863, he was wounded, injured or diseased as follows.
	They and or letter of
Shell wound of left thigh tearing	Daine was less- makeing
any on allah and and	william will
Topla carring ham	
The sawe lande ally I assente all.	
ual lesa,	
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of county been allowed an invalid pension of Dollars, for the year 1896.	Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of
Sworn to and subscribed before me, this, the David A. Viling day of 1897. POST OFFICE	day of
	North-Nista fulls the second
Note.—State folly the nature of wound or character of disease which excess the disability, resulting from the wound or disease.	Norx—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.
STATE OF GEORGIA,	
Autton County.	I, If A Jouley  Ordinary of said County,
do certify that I am well a County.	as certify that I am well acquainted with A D the Certify
that I am well acquainted with	applicant in the foregoing affidavit, and am well satisfied that the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be	in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
and that he resides in this County.	Given under my official signature and seal, this
Given under my official signature and seal, this	day of 1898.
day of	ARX
Affir / Your / Lers / L	berg. Sordinary Family
Ordinary County.	County.
County.	

STATE OF GEORGIA, County. hereby authorize_ to receive and receipt for the pension paid hereon and request that he remit same to at IN WITNESS WHEREOF, I have hereunto set my hand and seal, this..... day of Executed in presence of SOLDIER'S PENSION INVALID

POWER	OF A	TTOP	NEV
	O	TILL	IN IT. Y

Cour	nty. J
.1,	hereby authorize
	of
	pension paid hereon and request that he remit same to
at	Manufacture and American
IN WITNESS WHEREC	DF, I have hereunto set my hand and seal, this

SELECTION OF THE STORY ENGINE NO. 43 2

INVALID
SOLDIER'S PENSION

state chance

For Applicants Hereitofole Allow

1 or ribbitodues frotoentolo utinited Lensions. STATE OF GEORGIA, personally appears with I lines of talker County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 18 70; that he enlisted in the military service of the Confederate States (or of the State of during the was between the States, and served as a freeze in Company D of Sh Regiment of S Volunteers, S Brigade; that whilst engaged in such military service in the State of The Care and non the 17 day of 186 8, he was wounded, injured or diseased as follows: Sand of lest-thigh mathing. Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189  $\delta$ Sworn to and subscribed before me, this, the D. Rung

8 day of Zey 1899. POST OFFICE 18 day of Zees 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, Falkers County. do certify that I am well acquainted with Dail a. Ming the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this. 8

4 01	Applicants Heretotore Allowed Pensions
STATI	OF GEORGIA,
	Talkon County,
	~ //
-	sonally appears David B. Ringof Falks
County,	State of Georgia, who being duly sworn, says on oath that he is a bona fide citiz
and resid	lent of said State and County, and has resided therein continuously over a
the Conf	day of 1840; that he enlisted in the military service
tme Conn	ederate States (or of the State of ) during the war to states, and served as a Privale in Company of the states of 1
Regimen	// / J
-	in such military service in the State of Many and on the
day of	1862, he was wounded, injured or diseased as follows:
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	mung same useless
	TO THE RESIDENCE OF A BOOK OF THE PROPERTY OF
Depo ending (	nent makes application for the pension to which he is entitled for the year
	Talker leretorore under said law as a resident of
<b>Æ</b>	County been allowed an invalid pension of Dollars, for the year 189 Z.
Sworn	n to and subscribed before me, this, the
	day of Man 1900.) POST OFFICE
2	day of 1900 Post Oppice
2	i -
2	mmucy
2	mmucy
2	State fully the nature of wound or character of decase which causes the disability, and explain particularly the liability resulting from the wound or disease.
2	mmucy

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

Given under my official signature and seal, this

Affix your seal hore. day of Man 1900.

Ordinary Facel County

5 4 05 VI ....

For Applicants Heretofore Allowed Pensions:

County.

040	Enrolled. )		D	NSION.		61	welles		EY.	ner of Pensions.	TO		Atlanta.	7
The Jan Com	(For Those Aiready	No.	DISABLE	SOLDIER'S PENSION	1901	Namedavid a Plu	County Trill & Disability & M. M. Jh.	Amount, \$ 250 00	JOHN W. LINDSEY	Commissioner	WARRANT HANDED	M	Geo. W. Barrison, Biste Printer, Atiant	whin

POWER OF ATTORNEY.

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

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

hereby authorize

County.

STATE OF GEORGIA.

Executed in presence of

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

FOR APPLICANTS HERETGEORE ALLOWED PENSIONS

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Jullon County.
- County.
Personally appears David a Ring of Julion
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
that he chilsted in the military service of the Con-
States, and served as a material in Company of the Regiment
of OC Volunteers, In Gompany O, of Oth Regiment
in such military service in the State of 2000, on the 17 day
of Jeff N 186 3 he was wounded, injured or diseased as follows:
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The state of the s
The state of the s
Deponent makes application for the pension to which he is entitled for year end-
ing Optober 26th, 1901. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Sworn to and subscribed before me, this the David A. Aucs
day of Jany 1901 Postor William
day of Jacry 1901. Postoffice all ant I
The Wextuson
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
Tullon Country
MAR LIGOX
I, MAR Welkinson Ordinary of said County,
territy that I am well acquinted with ways a
pplicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
Given under my official signature and seal, this
day of 1901.
Ann I Stor Wilkinson
Ordinary Field as
Ordinary Tule County.

#### FUR APPLICANTS HERETUPURE ALLOWED PENSIONS.

STATE	OF GEORGIA,
F	ulton. County.
	$\mathcal{L}$
	ly appears of Hulton.
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 70; that he enlisted in the military service of the Con-
	es (or of the State of) during the war between the
States, and s	erved as a in Company A, of 13 th Regimen
of_DC	Volunteers, lives 's Brigade: that whilst engaged
in such milita	ry service in the State of day, on the // day
of def	1862, he was wounded, injured or diseased as follows:
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Woun	did in left thigh
harman and a comp	· manuser agreement and the control of the control
	The state of the s
Sworp to	Dollars, for the year 1901.  and subscribed before me, this the)
10	day 1902 Post-office allhuta Ja
Norn-State	fully the nature of the wound or character of disease which causes the disability, and explain and character of disease.
STATE OF	GEORGIA,
Fult	013 / 013 / 12'0 × '
I,	Johns Rivelsmion Ordinary of said County.
o certify that	I am well acquainted with Ol Rive
he applicant in	n the foregoing affidavit, and am well satisfied that the statements made by
im in his said	affidavit are true, and I know he is the individual he represents himself to
e and that he	resides in this County.
	Given under my official signature and seal, this
	day of Acres 1 signature and seal, this
Affiz	John Hall King
neal here	1 de la composition
	Ordinary Fulton, County.
1 / 1	Norm.—Fill all blanks and of Company and Regiment. Norm.—All vouchers and affidavits must bear date after January 1, 1902.

#### POWER OF ATTORNEY.

STATE OF GEORGI	Α,	, 200
Market 10 1 10 10 10 10 10 10 10 10 10 10 10 1	County.	
Ι,.	No. of the same of	hereby authoris
	of	
to receive and receipt f	or the pension paid hereon,	, and request that he remit same
		and the second s
	277	
In Witness Where	or, I have hereunto set my	hand and seal, this
day of	1905.	
	A.	
Executed in the	presence of	L. 8

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No. V 9

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DISABLED

Nomany Pullon

Nomination of Persions.

JOHN W. LINDSEY,

Commissioner of Persions.

WARRANT HANDED TO

WARRANT HANDED TO

WARRANT HANDED TO

Jy CLEES The Con-

C. Grordia,

PLICANTS HERETOFORE ALLOWED PENSIONS.

#### FUWER OF ATTORNEY,

STATE OF GEORGIA,	. )
STATE OF GEORGIA,  Cour	NTY.
	nereby authorize
and the section of th	of
	ion paid hereon, and request that he remit same to
	by
at.	
In Witness Whereof, I have	hereunto set my hand and seal, this
day of1906,	
	[L. S.]
Executed in the presence of	
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Con Section 1360.

(FOR THOSE ALREADY ENFOLLED)

No.—3

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SOLDIER'S PERSION

TOOMY

Fulton

Co. Regiment W. Linder

Amount, & Linder

Omnitisions of Persions.

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William I well dall a TOMER

Fulton. county.	
Personally appears D. a. Ring	Fulton.
County, State of Georgia, who, being duly sworn, says on oatl	h that he is a hora fide cities
and resident of said State, and has resided therein continuous	sly ever since the
	e military service of the Con-
federate States (or of the State of S. C.	) during the war between the
States, and sepred as ain Company_	De Itani
of S. C. Volunteers Tuigg & 's 1	Brigade: that whilst engaged
in such military service in the State of	, on theday
	jured or diseased as follows:
J 4	jarou or discased as follows:
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Disabled leg Drarpshi	ug
	No. 1 to the second sec
of Manager and Australia	e la companya da c
· · · · · · · · · · · · · · · · · · ·	1 2 2 2 2 3
Deponent makes application for the pension to which	he is entitled for the year
ending October 26th, 1905. I have heretofore, under	said law, as a resident of
Fulton. County, been all	owed an invalid pension of
Jufty Dollars, for the	e vear 1904
sworn to and subscribed before me, this the	. 0
	A Trans
day of JAN 2 1905 1905.	
Post-office	
NOTE.—State fully the nature of the wound or character of disease which articularly the extent of the disability resulting from the wound or disease.	h causes the disability, and explain
1.	
STATE OF GEORGIA,	
Fulton. County,	
I, Milleringer	Ordinary of said County,
o certify that am well acquainted with . A. A.	in a
he applicant in the foregoing affidavit, and am well satisfied	that the statements made
y him in his said affidavit are true, and I know he is the indiv	idual he represents himself
be, and that he resides in this County.	
Given under my official signature and seal, this	JAN 2 1905
day of	
Affix Pour Pour Pour Person	Manuel
Poul here.	ton
	County.

Nord.—Fili all blanks and of Company and Reg

LAN WILLIAMIS HEWELALOKE UPOMED BENSIONS State of Georgia, Fulton. County. Personally appears 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_ 18 (5; that be enlisted in the military service of the Confederate States, (or of the State of_ _) during the war between the States, and served as a Trivale in Company 9, of 18 th Regiment 's Brigade; that whilst engaged in such military service in the State of _, he was wounded, injured or diseased as follows: 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 Dollars, for the year 1905. Sworn to and subscribed before me, this the JAN 1 1906 1906. Post-Office Agra.—State fully the nature of the wound or character of disease which causes the disability, and explaint particularly the extent of the disability resulting from the wound or disease. State of Georgia, County. Wilkerson Ondinary 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 JAN 1 1906

> Norn.—Fill all blanks and of Company and Regiment. Rorn.—All voublers and aidda vist must be at date after January, 1st, 1906.

Ordinary

Fulton. County.