APPLICATION FOR PENSION

How Made: What to Contain: Description of Disabilities: Oath Prescribed

Form No. 1 For \$125.00

Application of Indigent Soldier or Spiler of the Late Confederacy under Chanter 102 Code of 1906 as Amonded by Laws of April 5th, 1910 Chapter 207 and Laws of March 24th, 1918 Chapter 199

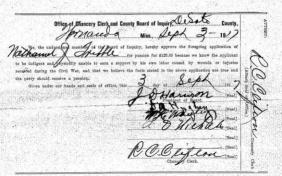
Annications must be filed in duplicate with the Chancery Clerk on or before the first Monday in Sentember of the year in which application is first filed, and no application will be extertained not on the printed Applicant must make answer to all of the following Questions O | What is your name? Answer O. What is your age? Answer Q In what county do you reside t Answer What is the name of your postoffice! Answer Are you a bone fide resident of the State of Mississippi 1 Ans ami O. How long have you been a home fide resident of Mississippit. Widows Q. Are you married or unmarried! Answer Q. In what State and County did vonereside when you enlisted in the service of the Confederate States I. miss Answer Walla Busha Co 330 What was the date of your enlistment? What was the number of the regim 3rd mies to The name of its commander! Answer Col-O. Letter of designation of the company in which Markadale O. The name of its captain? Answer The length of time which you served in the a 3rd day aug 1868 /s limo Were you ever discharged or transferred from the above comman Q. If so, give the date of discharge or transfer? Answer If discharged, on what grounds? Answer If transferred to what command ! Answer ! Did you enlist the second time in the Confederate service? Answer. If so, into what regiment or Company? Answer Were you discharged from this command before the surrender in 1865? Answer If so, for what cause! Answer Were you over wounded while in actual service? Answer Give date on which you received your wound? Answer at miss & Collierie Q. At what place were you wounded? Answer. he name of the vessel in which you What was the number of the regiment or the name were serving when the would was received? Answer ? Same as best O. The name of the commander? Answer

Q. Letter of designation of the company in which you were serving when you received the

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Q. The name of its captain? Answer What is the nature of your wound? Answer.

| | | Have you lost both feet or both hands? Answer 10 |
|-----|------------|--|
| | Q. | Have you lost entire use of both feet or both hands? Answer |
| | | Have you lost both eyes? Answer 1910 |
| | | Have you lost one hand and one foot or one leg! Answer /YO |
| | Q. | If you have lost both feet or both hands, or the entire use of both feet or both hands, or one hand and |
| | | one foot or one leg or both eyes, was such loss caused by wounds or injuries received while enlisted in the Confederate Army's Answer Lost both legels by Contarack |
| | | Are you suffering of irreducible hernia or locometer ataxia caused by wounds or injuries received while in the Confederate service! Answer |
| | | Were you at any time absent from your command without leave? Answer Juvas root |
| | | If yes, how long and why! Answer. |
| | Q. | Did you over absent yourself from your command without leave, and join snother? Answer |
| | | Were you with your command in active service at the surrender in 1965? Survey Horris on sickly Where did your command surrender! Asswer Modello Holy |
| | | Were you with your command in active service at the surrender on 1865 Answer Monte on Steke |
| | | Where did your command surrender! Answer Mobile Alex |
| | | were you assette from it water it surrightered. Truswer. |
| | Q. | Why were you absent? Answer Siels How long had you been absent? Answer Just days before Carries of Just days |
| | Q: | What is your occupation at present? Answer Have none and totally blind |
| | 9. | Do you apply for a pension because you are indigent and unable to earn a support by your own labor? |
| | | Answer MUS |
| 1 | Q. | Do you hold any State, United States, County or City office from which you are receiving as a salary |
| | | or fees the sum of three hundred dollars per annunt Answer |
| | | mave you any sons over 10 and inder 21 years of age; steps of |
| | Q. | If yes, how many! Answer. |
| ti | | Have you any property in your own right or in the right of your wife! Answer Your |
| 100 | | What is its true, just and correct value? Answer |
| | Q. | |
| y | | If hot, with whom do you how liver answer. |
| | | Is the person you are living with a relation! Answer a daughter MLS. |
| | | If so, what relation Answer Haughles |
| | Q. | Have you any relation or connections whose legal duty it is to provide for you Answer |
| | | |
| | the hav | "I has solvenly writer for efficient that I was a Confidences solding, unline to current of such Confidences solding or for the data with you. But I was a Confidence of the C |
| | 64.0 | APPIDAVIT-We the undersigned verter believe the facts stated to the above application to be two analytic and |
| | | |
| 9 | Sw | orn to and subscribes before me, this day of (Signature of Wings) |
| | - | august 10 of U.S. detains |
| | 11 | Major of Officer (Signature of Witness) |
| | 1 | TP. Mast be attended by one or more creditable witnesses. |
| 1 | | (Signature of Witness) |
| | - | Nathanid gr Tribble |
| | | Sworn to and subscribed before me this (157 of CAMMAN A D. 1917 |
| | 142 | Swore to and subscribed before me, third day of Callynel A. D., 1917 |
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N. B.—If the Board approves this application, the Chancery Clerk will so certify, after recording the same it a book kept for that purpose, and forward all of the approved applications in a body (not one at a time) to the Anditor's office by the first day of October.

No application forwarded after that time will be received.

Bejected applications should not be forwarded to this office.

Pension Application

Form No. 1