

5469

Endorsements Hereon for Comptroller's Use Exclusively.

FORM No. 1.

CONFEDERATE PENSION APPLICATION.

Name of Applicant,

G. H. Adams

Henderson County.

Post Office *Arthur's Bay*

Comptroller's File No. *5469*

I have carefully examined the within application for pension, together with the proof in support thereof, and

I recommend that the application be

Approved
this *8* day of *February*

A. D. *1900*

My Susan
Pension Clerk.

I hereby *approve* the within application

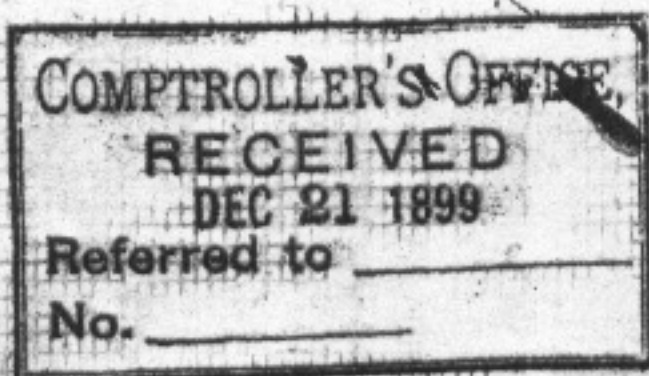
for pension, this *8* day of

February A. D. *1900*

W. H. Austin
Comptroller.

No Application Rejected by County Judge or County Commissioners
Should be Forwarded to Comptroller.

MAVERICK-CLARKE LITHO CO., SAN ANTONIO.



FORM No. 1.

APPLICATION of Indigent Soldier or Sailor of the late Confederacy for pension under the Act of May 12, 1899.

THE STATE OF TEXAS, }

COUNTY OF Henderson }

To the Honorable County Judge of Henderson County, Texas.

Your petitioner, G. V. Adams respectfully represents that he is a resident citizen of Henderson County, in the State of Texas, and that he makes this application for the purpose of obtaining a pension under the act passed by the Twenty-sixth Legislature of the State of Texas, and approved May 12, A. D. 1899, the same being an act entitled "An act to carry into effect the amendment to the Constitution of the State of Texas, providing that aid may be granted to disabled and dependent Confederate soldiers, sailors, and their widows under certain conditions, and to make an appropriation therefor," and I do solemnly swear that the answers I have given to the following questions are true.

NOTE—Applicant must make answer to all of the following questions, and such answers must be written out plainly in ink.

- Q. What is your name? Answer George V. Adams
- Q. What is your age? Answer 77 years
- Q. In what County do you reside? Answer Henderson
- Q. How long have you resided in said County and what is your post office address? Answer 24 years
Post Office Athens
- Q. Have you applied for a pension under the Confederate Pension Law heretofore, and been rejected? If so state when and where. Answer No
- Q. What is your occupation if able to engage in one? Answer Shoemaker when able
- Q. What is your physical condition? Answer Feeble
- Q. If your physical condition is such that you are unable by your own labor to earn a support, state what caused such disability. Answer Infirmity of age and general debility
- Q. State in what company and regiment you enlisted in the Confederate army, and the time of your service? Answer Company "A" of Ala. was made private of 1st Ala. Inf. from 1862 till or more or less about some date 1864
- Q. If you served in the Confederate navy state when and where, and the time of your service. Answer No
- Q. State whether or not you have received any pension or veteran donation land certificate under any previous law, and if you answer in the affirmative state what pension or veteran donation land certificate you have received. Answer No
- Q. What real and personal property do you now own, and what is the present value of such property? Give list of such property and value. Answer House and lot in Athens valued at (\$300.00) three hundred dollars, house stood

Q. What property, and what was the value thereof have you sold or conveyed within two years prior to the date of this application? Answer none

Q. What income, if any, do you receive? Answer none

Q. Are you in indigent circumstances; that is, are you in actual want, and destitute of property and means of subsistence? Answer Yes, with the exception of above named

Q. Are you unable by your labor to earn a support? Answer Yes

Q. Have you transferred to others any property of value of any kind for the purpose of becoming a beneficiary under this law? Answer No

Q. Did you ever desert the Confederacy? Answer No

Q. Have you been continuously since the first day of March, 1880, a bona fide resident citizen of this State? Answer Yes

Wherefore your petitioner prays that his application for pension be approved and that such other proceedings be had in the premises as are required by law.

(Signature of Applicant) G. V. Adams

Sworn to and subscribed before me this 3 day of July A. D. 1899

(SEAL)

W. G. Freeman
County Judge Henderson County, Texas.

AFFIDAVIT OF WITNESSES.

(NOTE—There must be at least two credible witnesses.)

THE STATE OF TEXAS,

COUNTY OF Henderson

Before me, W. G. Freeman

County Judge of Henderson

County, State of Texas; on this day personally appeared G. V. Adams,

J. I. Tidwell, & E. J. Adams

who are personally known to me to be credible citizens, who being by me duly sworn on oath, state that they personally know G. V. Adams the above named applicant for a pension, and that they personally know that the said G. V. Adams enlisted in the service of the Confederacy, and performed the duties of a soldier (or sailor) as claimed by him in the above and foregoing application, and that they further know that he, the said applicant, is unable to support himself by labor of any sort.

(Signature of Witness) G. V. Adams

(Signature of Witness) J. I. Tidwell

(Signature of Witness) E. J. Adams

(Signature of Witness)

Sworn to and subscribed before me this 14th day of July A. D. 1899

(SEAL)

W. G. Freeman
County Judge Henderson County, Texas.

AFFIDAVIT OF PHYSICIAN.

THE STATE OF TEXAS,

COUNTY OF _____

Before me _____

County Judge of _____

County, State of Texas, on this day personally appeared _____

_____ who is a reputable practicing physician of this County, who being by me duly sworn on oath, states that he has carefully and thoroughly examined _____ applicant for a pension, and finds him laboring under the following disabilities which render him unable to labor at any work or calling sufficient to earn a support for himself:

*Chronic Prostatitis and a
retarded ability*

(Signature of Physician)

Sworn to and subscribed before me this _____

day of _____

A. D. _____

(SEAL)

County Judge _____

County, State of Texas.

CERTIFICATE OF COUNTY JUDGE.

THE STATE OF TEXAS,

COUNTY OF _____

I, _____

County Judge of _____

County, State of Texas, do hereby certify that on the _____

day of _____

A. D. _____

before me came on to be heard the application of _____

_____ for a pension under the Confederate Pension Law of this State, approved May 12, A. D. 1899; that the answers of said applicant to the questions propounded were made under oath as the same appear in writing in the foregoing application; that the affidavits of the witnesses who are credible citizens were made before me as the same hereinbefore appear, and that the foregoing affidavit of Doctor _____

who is a reputable practicing physician of this County, was made before me. I also certify that the said applicant _____ is not an inmate of the Texas Confederate Home, nor otherwise disqualified under the provision of Section 12, of the Confederate Pension Law. I further certify that after considering all the proceedings had before me relative to the said application for a pension by the said _____ I find the said applicant is lawfully entitled to the pension provided by the Confederate Pension Law of this State, and I hereby approve said application.

Witness my hand and seal of office at _____

day of _____

A. D. _____

(SEAL)

County Judge _____

County, State of Texas.

CERTIFICATE OF COUNTY COMMISSIONERS.

THE STATE OF TEXAS,

COUNTY OF _____

We, the undersigned members of the Commissioners Court of _____

County, Texas, hereby certify that the foregoing application of _____

for a pension, together with the proof in support thereof, was duly submitted

by Hon. _____

County Judge of this _____

County, to the Commissioners Court of this _____

County, at a regular term thereof on the _____

day of _____

A. D. _____

and after a careful consideration of the same we find the said applicant is

lawfully entitled to the pension provided for by the Confederate Pension Law of this State, and we hereby approve said application.

Witness our hands and seal of office at _____

day of _____

A. D. _____

(Signatures of Commissioners.)

(SEAL)

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