35787 /

Widow's Application for a Pension

The commissioner of Pensions reserves the right to cell for addition test throng if he deems 3-28-28

Name of Applicant.

Name of Applicant.

Name of Applicant.

Heridessa County.

Postoffice Atheur, 1x. 141

Filed JUN 4- 1919

Approved July 16-1919

Pension Wowed from June 1-1919

Commissioner of Pensions.

FORM B

694-315-2M

For Use of Widows of Soldiers who are in Indigent Circumstances

For ese of widows of Soldiers who are in Thangent Circumstances
THE STATE OF TEXAS
COUNTY OF Meedeeson
I, Mrs. Nauey A. Gifson do hereby make application to the
Commissioner of Pensions for a pension, to be granted me under the Act passed by the Thirty-third Legislature of
the State of Texas, and approved April 7, A. D. 1913, on the following grounds: I am the widow of Desc. Frankline Help Some, deceased, who departed this life on the
day of feby, A. D/875, in the county of Franklin in the State of
I have not remarried since the death of my said husband, and I do solemnly swear that I was never divorced
from my said husband, and that I never voluntarily abandoned him during his life, but remained his true, faithful
and lawful wife up to the date of his death. I was married to him on the 25 day of See, , A. D.
860, in the country of Franklin, in the State of Jegg-
My husband, the said B. I. Gefisa, enlisted and served in the military service of the Confederate
States during the war between the States of the United States, and that he did not desert the Confederate Service.
I have been a resident of the State of Texas since prior to January 1, A. D. 1900, and have been continuously since
a citizen of the State of Texas. I do further state that I do not receive from any source whatever money or
other means of support amounting in value to the sum of \$300.00 per annum, nor do I own in my own right,
nor does anyone hold in trust for my benefit or use, estate or property, either real, personal or mixed, either
in fee or for life, of the value of one thousand dollars, exclusive of the home of the value of not over \$1000.00; nor
do I receive any aid or pension from any other State, or from the United States, or from any other source, and I do
further state that the answers given to the following questions are true:
1. What is your age? 7.8
2. Where were you born? Me Nary Co. Jenn
3. How long have you resided in the State of Texas? / Since 1859
4. How long have you resided in the county of your present residence? And what is your postoffice ad-
dress? 16 years - Athens, Lex, B#1-
· 2 -
5. Did your husband draw a pension? If so, give his file number 6. What was your husband's full name? Designature Financhia Gifs
7. What was the date of his death? Fieldy 11, 1875
8. In what State was your husband's command originally organized?
9. How long did your husband serve? If known to you give date of enlistment and discharge , 2 - yec.
He was discharged at close of the mer.
10. What was the name or letter of the company, or number of the battalion, regiment or battery of artillery
in which your husband served? If he was transferred from one branch of service to another, give time of transfer,
description of command and time of service. Thereby of Copt Barretti Co., C
Smuts hatallian cavalry-
11. Name branch of service in which your husband served, whether infantry, cavalry, artillery, or the navy, or
if commissioned as an officer by the President, his rank and line of duty, or if detailed for special service, under
the law of conscription, the nature of such service, and time of service Cavalry - prix
12. Have you transferred to others any property of any kind for the purpose of becoming a beneficiary under
Whorefore your politioner prove that her explication for a proving the state of the
Wherefore your petitioner prays that her application for a pension may be approved and such other proceed-
(Signature of Applicant)
Sworn to and subscribed before me, this 7 day of Morel A. D. 1919.
Villia Do second
[Seal.] County Judge Heeceleson County, Texas.

REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

AFFIDAVIT OF WITNESSES

[Note.—There must be at least two creditable witnesses.] THE STATE OF TEXAS, COUNTY OF There de you Acce Precede, County Judge of Hearders State of Texas, on this day personally appeared P.C. Bass, & P. Fe Transmell, who are personally known to me to be creditable citizens, who, being by me duly sworn, on oath state that they personally know that , applicant for a pension as the widow of 19. Le deceased, is in truth and fact the widow of Said Ja Zifsam deceased; that they personally know that she has not remarried since the death of her husband, for whose service in the army she claims a pension, and that they have no interest in this claim. (Signature of Witness) day of Mich Sworn to and subscribed before me, this..... [Seal.] AFFIDAVIT OF WITNESSES -There must be at least two creditable witnesses.] THE STATE OF TEXAS, COUNTY OF Header County Judge of Herece State of Texas, on this day personally appeared Pe Bours P. L. hacconell , who are personally known to me to be creditable citizens, who, being by me duly sworn, on oath state that they personally know the above named applicant for pension, and that they personally know that the said Mency A. Libsue has been a bona fide resident citizen of the State of Texas since prior to January 1, A. D. 1900, and that they have no interest in this claim. day of Sworn to and subscribed before me, this

[Seal.]

County Judge Hersesses County, Texas.

REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

AFFIDAVIT OF WITNESSES

(If possible, the two witnesses should have served with the applicant's husband in the army, and if so, let them, or either of them, state it in their oath; also any information regarding the army service of applicant's husband.) COUNTY OF. , County Judge of July State of Texas, on this day personally appeared 19 known to me to be creditable citizens, who, being by me sworn, on oath state that they are personally acquainted with the foregoing applicant, and that the facts set forth and statements made in her application are correct and true, to the best of their knowledge and belief, and that they have no interest in this claim. And further make oath to the following facts touching the service of the applicant's husband in the Confederate Army; (State fully the year of your source of knowledge) : Love line ed our company under Coft. Botallion Cavelry, Located and I Phohestron (Signature of Witness) Sworn to and subscribed before me, this ... County, Texas. [Seal.] CERTIFICATE OF STATE AND COUNTY ASSESSOR State and County Assessor in the County of Munder State of Texas, do certify that Mrs. Many to the foregoing application for a pension, under the Act of the Thirty-third Legislature, approved April 7, 1913, is charged on the tax rolls of said county with a homestead of the value of \$6.00

State and County Assessor.

Dollars, and of other property, real or personal, or both,

Dollars.

Given under my hand, this.

of the value of ...

REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

J. A. McDONALD

(LAWYER)

COUNTY JUDGE HENDERSON COUNTY

ATHENS, TEXAS

The State of Texas, County of Henderson. Before me J A McDonald, county judge, in and for Henderson county, Texas, on this day personally appeared P.C Barr, well known to me to be a good & creditable citizen of said county and upon his eath deposes and says that personally and well knews the applicant for pension herein stated also the witness I.D. Rebertson, and that he has carefully read ever the statements made by said applicant as well that made by said Rebertson and that the facts therein stated are true; and that affiant has no interest whatseever in said claim for a pension, only that justice should be done.

Swern to and subscribed before me by P C Barr, on this the 3, day of June A D 1919.

County Judge Henderson County, Texas.



377-119-1M



Comptroller's Department State of Texas Austin

H. B. TERRELL, COMPTROLLER L. W. TITTLE, CHIEF CLERK

To the Adjutant General,		
War Department,		
Washington, D. C.		
Dear Sir: I have the honor to request the military record of	B. F. Gibson	who is
capt Barrett's Cor	,	
Cal Sweet's Bata	lion. Txax	avalor
in service in the Confederate States Army.		
Purpose: The Widow Person ab	pove named is an applicant for a Confede	erate pension granted
by the State, and I desire to verify his proof of service.		(TX)
	Very respectfully,	
	/4/2 Vi	rrece

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Gibson V.								
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Form 768b-S30-126-4m

APPLICATION FOR MORTUARY WARRANT

THE STATE OF TEXAS, County of HULLIST I W L J J J J J J J J J J J J J J J J J J				0
do hereby egytify that I am the person to whom is entrusted the towing of the accounts and indebtedness of the late	THE STATE OF TEXAS,)		20. 67
do hereby egytify that I am the person to whom is entrusted the towing of the accounts and indebtedness of the late	Buluso	2	, 10 Z	Fileson
the late	County of)		0
State of Texas, and whose file number was 5.787 and whose original contry was. The said pensioner. Mark the said pensioner. Mark the town of the said pensioner. Towns. The pensioner died in the home of the said separation is hereby made for, shall be applied to poring all repart of the funeral expenses incurred by the said pensioner. The the warrant, which application is hereby made for, shall be applied to poring all repart of the funeral expenses incurred by the said pensioner. I further certify that the warrant for the current quarter has not been cashed by the pensioner, to the best of my knowledge and belief. I am related to the pensioner as (Priends). That my postoffice address is. City Signed. M. State of Texas. CERTIFICATE OF UNDERTAKER CERTIFICATE OF UNDERTAKER COUNTY of Thursday of State of Texas. CERTIFICATE OF UNDERTAKER COUNTY of Thursday of State of Texas. CERTIFICATE OF PHYSICIAN I and that I am of the opinion that warrant herein applied for should be issued to the said United State of Texas. CERTIFICATE OF PHYSICIAN I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed. L. B.	1111 716 .		1 10 1	
The said pensioner 1922, if the town of Author 1923, if the town of Author 1923, if the town of Author 1924, country fulfilled in the town of Author 1924, and that I had charge of the body of Author 1924, and that I had charge of the body of Author 1924, and that I had charge of the body of Author 1924, and that I had charge of the body of Author 1924, and that I am of the opinion that warrant herein applied for should be issued to the said Author 1924, and that I am a practicing physician, and that I attended Author 1925, and that I am a practicing physician, and that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed L Boyd M D	the lave	1		411
County of Frank. 1928, in the town of Aurifician. The pensioner died in the home of Texas. That the warrant, which application is hereby made for, shall be applied to paying all repart of the funeral expenses incurred by the said pensioner. I further certify that I am of the opinion as (Friend). Signed Auriful 1928. CERTIFICATE OF PHYSICIAN Lighert aker and approved March 2, 1923. CERTIFICATE OF PHYSICIAN CERTIFICATE OF PHYSICIAN Lighert Lam of the opinion that the said approved March 2, 1923. Signed Auriful 1928. CERTIFICATE OF PHYSICIAN CERTIFICATE OF PHYSICIAN Lighert Lam of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed Auriful 1928. CERTIFICATE OF PHYSICIAN Lighert Lam of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed Auriful 1928. Auriful 1928. CERTIFICATE OF PHYSICIAN Lighert 1 am a practicing physician, and that I attended 1 am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed Auriful 1 and 2 Auriful 1 and 2 Auriful 1 Aurifu	7711 5			was Julius
The pensioner died in the home of the pensioner as the pensioner as the warrant, which application is hereby made for, shall be applied to pring silf-part of the funeral expenses incurred by the said pensioner. The time are pensioner as the pen	The Balls pendioners	6/	7	died on the
The pensioner died in the home of the war rant, which application is hereby made for, shall be applied to paring salfor part of the funeral expenses incurred by the said pensioner. I further certify that the warrant for the current quarter had not been cashed by the pensioner, to the best of my knowledge and belief. I am related to the penioner as (Friend) that my postoffice address is. Signed M. J. W. State CERTIFICATE OF UNDERTAKER I. G. C. HOLLER OF UND	-1 .	•	n of weight	les
who was related to the pensioner as That the warrant, which application is hereby made for, shall be applied to poing all or part of the funcal expenses incurred by the said pensioner. I turther certify that the warrant for the current quarter has not been cashed by the pensioner, to the best of my knowledge and belief. I am related to the penioner as (Friend). Sworn to before me this. CERTIFICATE OF UNDERTAKER I CERTIFICATE OF UNDERTAKER I CERTIFICATE OF UNDERTAKER I COUNTY OF FRIENDERS State of Texas. CERTIFICATE OF UNDERTAKER I COUNTY OF FRIENDERS STATE OF DAY STATE OF PHYSICIAN I CERTIFICATE OF PHYSICIAN I CERTIFICATE OF PHYSICIAN I CERTIFICATE OF PHYSICIAN I CERTIFICATE OF PHYSICIAN I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed L Boyd M D Signed L BOYD Signed L BOYD I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed L BOYD I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923.	County of Tayler	, Texas.	800	
That the warrant, which application is hereby made for, shall be applied to proing silf part of the funeral expenses incurred by the said pensioner. If urther certify that the warrant for the current quarter has not been cashed by the pensioner, to the best of my knowledge and belief. I am related to the pensioner as (Friend). that my postoffice address is. City Sworn to before me this. CERTIFICATE OF UNDERTAKER I. C. C. HAWLEY State of Texas. CERTIFICATE OF UNDERTAKER I. C. County of Thurk County of Thurk County who died in the town of Manual County of Thurk County of Thurk County of Thurk County of The State of The Law of the body of Manual 1922. That said body was prepared for burial by me on the 15th day of Manual 1922. That said body was prepared for burial by me on the 15th day of Manual 1922, and that I am of the opinion that warrant herein applied for should be issued to the said W. T. State of Thurk Who makes the foregoing application. CERTIFICATE OF PHYSICIAN I. D. Gould of the said W. T. State of Thurk County Office of Thurk County of Thurk County of Thurk County Office of Thu	The pensioner died in the home of.	11/0		
funeral expenses incurred by the said pensioner I further certify that the warrant for the current quarter had not been cashed by the pensioner, to the best of my knowledge and belief. I am related to the penioner as (Friend) that my postoffice address is. City Signed A. State of Markey Publish in and for Accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. CERTIFICATE OF UNDERTAKER I CERTIFICATE OF PHYSICIAN I CERTIFICATE OF PHYSICIAN I CERTIFICATE OF PHYSICIAN I CERTIFICATE OF PHYSICIAN I DEPTITE OF UNDERTAKER I Turther certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed L B Boyd M D	who was related to the pensioner as	Trank		
I further certify that the warrant for the current quarter has not been cashed by the pensioner, to the best of my knowledge and belief. I am related to the penioner as (Friend). It am related to the penioner as (Friend). Signed A. G. State of Texas. City Signed A. G. State of Texas. CERTIFICATE OF UNDERTAKER I. G. HARVEY A. Gounty of Flumbers of the town of M. State of Texas. Country of Flumbers of the body of Market 1923. That said body was prepared for burial by me on the 15-22 day of Market 1923. That said body was prepared for burial by me on the 15-22 day of Market 1923. That said body was prepared for burial by me on the 15-24 day of Market 1923. That said body was prepared for burial by me on the 15-25 day of Market 1923. That said body was prepared for burial by me on the 15-25 day of Market 1923. That said body was prepared for burial by me on the 15-25 day of Market 1923. That said body was prepared for burial by me on the 15-25 day of Market 1925 and that I am a practicing physician, and that I attended 1925. Signed C. C. HARVEY Undertaker. CERTIFICATE OF PHYSICIAN I. D. Bayton 1925 and that I am a practicing physician, and that I attended 1925 and that I am a practicing physician, and that I attended 1925 and that I am a practicing physician, and that I attended 1925 and that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed A. Boyton 1925 and the passioner, to the correction of the physician physician and approved March 2, 1923.				paying all or part of the
best of my knowledge and belief. I am related to the penioner as (Friend): that my postoffice address is City Signed A. G.	funeral expenses incurred by the said pe	ensioner / Lo	ney a	Tipio
I am related to the penioner as (Friend). that my postoffice address is. Signed. W. J. Sisted. Sworn to before me this. 3. day of March 1922. CERTIFICATE OF UNDERTAKER I. C. J. HANNING. CERTIFICATE OF UNDERTAKER I. J.	I further certify that the warrant fo	or the current quart	er has not been cashed	by the pensioner, to the
Sworn to before me this. CERTIFICATE OF PHYSICIAN In the physician, and that I attended CERTIFICATE OF PHYSICIAN I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed Si	best of my knowledge and belief.	,		
Sworn to before me this. Signed Signed State of Texas. Signed Signed State of Texas. Signed Signed Signed State of Texas. Commy Pathie in and for State of Texas. CERTIFICATE OF UNDERTAKER I. C. HAVVIY do Furnish State of Texas. County of Turnish State of Texas. County of Turnish State of Texas. That said body was prepared for burial by me on the State of Sta	I am related to the penioner as (Fr	iend).		
Sworn to before me this	that my postoffice address is			
Sworn to before me this	Where T.	exas	12 ZO Z	
CERTIFICATE OF UNDERTAKER I. C. HAVVY I. do certify that I am undertaker in the town of M. V. L. W. County of F. Mark G. State of T. Y. A. M. Who died in the town of M. W. L. County of F. Mark G. State of T. Y. A. M. Who died in the town of M. W. L. L. County of F. Mark G. State of T. Y. A. M. Who died in the town of M. W. L. L. County of F. Mark G. State of T. Y. A. M. Who died in the town of M. W. L.	City		1 001 0 1) Str	ato,
CERTIFICATE OF UNDERTAKER I. C. HAVVY I. do certify that I am undertaker in the town of M. V. L. W. County of F. Mark G. State of T. Y. A. M. Who died in the town of M. W. L. County of F. Mark G. State of T. Y. A. M. Who died in the town of M. W. L. L. County of F. Mark G. State of T. Y. A. M. Who died in the town of M. W. L. L. County of F. Mark G. State of T. Y. A. M. Who died in the town of M. W. L.	31	Signe	d W 7 51	Mort
CERTIFICATE OF UNDERTAKER I. C. C. HONDEY I. do certify that I am undertaker in the town of Mr. Ulawar County of Flunch County of Flunch County of State of Total County of Honor County of Flunch County On the State of County of Flunch County On the State	Sworn to before me this	day of	gren-	192.8
CERTIFICATE OF UNDERTAKER I. C. C. HONDEY I. do certify that I am undertaker in the town of Mr. Ulawar County of Flunch County of Flunch County of State of Total County of Honor County of Flunch County On the State of County of Flunch County On the State	0	1	hours TC	ulac
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I. C. E. HOWLY Lown of M. Various County of Franking State of Targary, that I had charge of the body of Mass. Marring A:	*	totary Public in an	d for France	State of Texas.
I. C. E. HOWLY Lown of M. Various County of Franking State of Targary, that I had charge of the body of Mass. Marring A:				
I. C. E. HOWLY Lown of M. Various County of Franking State of Targary, that I had charge of the body of Mass. Marring A:				
I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed Signed Boyd March 2	town of White town of White town of White town of White town, County on the 15 day of Mar on the 15 day of Mar warrant herein applied for should be issued who makes the foregoing application. CH Bayd am of the opinion that I attended am of the opinion that his ailments we	of Frank of Frank 1928 where the said was signed ERTIFICATE OF P	That said body was 1928, and that J. J. J. J. HYSICIAN God Certi	who died in the te of who died in the prepared for burial by me I am of the opinion that Undertaker. Type that I am a practicing in his last illness, and
I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923. Signed Signed Boyd March 2				
and approved March 2, 1923. Signed 4 Boyd m D	I further certify that I am of the o	pinion that the Mor	tuary Warrant above r	equested should be issued
Signed 2 8 Boyd m 2	in the name of the aforementioned appl	icant, in accordance	with Act passed by the	Thirty-eighth Legislature
	and approved March 2, 1923.		U A R	1 2 0
Physician's Address Wunfield Tel		Signed	20 1004	a m2
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Must return before 40 days expires from