FORM B 19492

Widow's Application for Pension

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		14	Applica	5	>
,	N	ame of	Applica	nt.	
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Approved.	OCT	22	1910		
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Pension a	llowed :	from	1		
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Rejected	*:	٠			
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FORM B

For Use of Widows of Soldiers Who are in Indigent Circumstances

THE	STATE OF TEXAS
County	of Henderson
	Ars M A Kines , do hereby make application to the Commissioner o
I, M	Ars M Hines , do hereby make application to the Commissioner of
Pensions	s for a pension, to be granted me under the Act passed by the Thirty-first Legislature of the State of Texas, and
	March 26, A. D. 1909, on the following grounds:
I ar	the widow of 12 8 Kinth , deceased, who departed this life on the day of April , A. D. 19/0, in the country of Neudenson , in the State of
2811	day of April , A. D. 19/0, in the country of Neudenson , in the State of
Zu	as.
I ha	ave not remarried since the death of my said husband, and I do solemnly swear that I was never divorced from my
said hus	sband, 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 15 day of Och , A. D./87
in the co	ounty of Smith , in the State of 14 1
Mv	husband, the said /L & Hins , enlisted and served in the military service of th
	rate States during the war between the States of the United States, and that he did not desert the Confederat
	I have been a resident of the State of Texas since prior to March 1, A. D. 1880, and have been continuously
	citizen of the State of Texas. I do further state that I do not receive from any source whatever money or othe
	of support amounting in value to the sum of one hundred and fifty dollars per annum, nor do I own in my own
	or does any one hold in trust for my benefit or use, estate or property, either real, personal or mixed, either in fee o
630. 74 3.035.7130	of the assessed value of over one thousand dollars; nor do I receive any aid or pension from any other State, o
	e United States, or from any other source, and I do further state that the answers given to the following ques
tions on	A. A. C.
1.	What is your age? TH years
2.	where were you born:
3.	How long have you resided in the State of Texas? Hill 1/4/13
4.	How long have you resided in the county of your present residence? And what is your postoffice address?
30	Tyras. Address As Changlin Fel 1
5.	What was your husband's full name? I about Some Kines
- 6.	When and where were you married? Oct 10. 1871, in smith Co. Lyos
7.	What was the date of his death? April 2811-15
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. I am
	+ sure, about 4 years.
	What was the name or letter of the company, or name or number of the battalion, regiment or battery of artil
	which your husband served? If he was transferred from one branch of service to another, give time of transfer
Roo	Jan in Clan 110. 15469, at Sustain The
- ((IX
11.	Name branch of service in which your husband served, whether infantry, cavalry, artillery or the navy, or if com
missione	ed as an officer by the President, his rank and line of duty, or if detailed for special service, under the law of
conscrip	otion, the nature of such service, and time of service. He was Coptain, and mode
1.	otion, the nature of such service, and time of service. He was Coptain, and mode
1.50	

19492

Wherefore your petitioner prays that her application for a pension be approved and such other proceedings be had	in
the premises as are required by law.	
(Signature of Applicant) I I Yings	
Sworn to and subscribed before me, this 2nd day of July , A. D. 19/6	
Caho xi free	
County Judge // County, Texas.	
[Seal.]	
AFFIDAVIT OF WITNESSES	10
[Note.—There must be at least two credible witnesses.]	
THE STATE OF TEXAS	
County of Aludison	
Before me John & Irme County Judge of Structurer Cour	ıty,
State of Texas, on this day personally appeared I Day walls VIII aulk, who are persons	lly
known to me to be credible citizens, who, being by me duly sworn, on oath state that they personally know that M	lrs.
M. A Hous, applicant for a pension as the widow of R.S. Hin	w
deceased, is in truth and fact the widow of I S Hinso deceased; that they personally kn	ow
that she has not remarried since the death of her husband, for whose service in the army she claims a pension, and t	hat
they have no interest in this claim. (Signature of Witness) J. D. Ruynolds	
(Signature of Witness) J. W. Wynolds	
(Signature of Witness)	
Sworn to and subscribed before me, this day of futy Oct., A. D. 19/0	
John S. Prinice	
County Judge Sander sone County, Texas.	
[Seal.]	
s	
AFFIDAVIT OF WITNESSES	
[Note.—There must be at least two credible witnesses.]	
THE STATE OF TEXAS \	
County of fluidution	
Before me John & Free Courty Judge of We colliston Cour	
State of Texas, on this day personally appeared for hypolds & W. Fink , who are personal	lly
known to me to be credible citizens, who, being by me duly sworn, on oath state that they personally know the about	ve-
named applicant for a pension, and that they personally know that the said // 10. 11. 4. Frues	
has been a bong fide resident citizen of the State of Texas since prior to March 1, A. D. 1880, and that they have	no
interest in this claim.	
(Signature of Witness) J. W. Vly nolds	
(Signature of Witness) W L Faull	
Sworn to and subscribed before me, this day of tilly OCK, A. D. 19/0	
Odi & Omine	
County Judge / Linduson County, Texas.	
[Seal.]	

HEPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE AMONIVED

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.)

HE STATE OF TEXAS	
ounty of	
Before me	County,
ate of Texas, on this day personally appeared	, who are personally
own to me to be credible citizens, who, being by	me sworn, on oath state that they are personally acquainted with the
regoing applicant, and that the facts set forth	and statements made in her application are correct and true, to the
st of their knowledge and belief, and that they	have no interest in this claim. And further make oath to the follow-
g facts touching the service of the applicant's hu	sband in the Confederate Army:
(Signature of	Witness)
(Signature of	Witness)
Sworn to and subscribed before me, this	day of, A. D. 19
	County Judge
[Seal.]	
	TARRE AND COLDEN ACCESCOD
	TATE AND COUNTY ASSESSOR
I, WITDAVIS	State and County Assessor in the County of
State of Texas, de	o hereby certify that Mrs. Ma Aferica,
ose name is signed to the foregoing application :	for a pension, under the Act of the Thirty-first Legislature, approved
arch 26, A. D. 1909, is charged on the land	and personal property rolls of the said county, in her name, or the
me of a trustee, with estate, real, personal and m	nixed, at the assessed value of 50 5 dollars.
Given under my hand, this	2/ day of Och , A. D. 19/0 (
• • · · · · · · · · · · · · · · · · · ·	State and County Assessor.

19492

REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

NOTICE.



Your next quarterly payment is due September 1, 1910. Please return this identification certificate properly verified on July 15, 1910, or immediately thereafter, in order that warrant may issue and reach you in due time.

E. A. BOLMES, Commissioner of Pensions.

STATE OF TEXAS.	1
County of	Before Me, the undersigned authority, personally
appeared	well known to me, who, after being by me
12, 1899, and March 26, 1909.	person to whom a pension has been granted under Acts approved May
That my application for a pension was original	ally made in HENDERSON County, and that the
number of my application, as shown by the record	s in the office of the Commissioner of Pensions, is 15469; that
my postoffice address is	s in the office of the Commissioner of Pensions, is 15469; that County of Texas; time of making my application, on which the pension was originally t of the Confederate Home. And that I am a bona fide resident
Also personally appeared	well known to me to be a credible
	natis personally acquainted with
, the pensioner above na	med, and the statement made byis true and correct.
(Seal.)	Signature of Pensioner)
Sworn to and subscribed before me by	each of above named parties, this
70	
Approved for	ollars.
Commissioner of Pensions.	

Form 768b-S21-124-2m

1-14-25-

APPLICATION FOR MORTUARY WARRANT

STATE OF TEXAS,	1
County of	I, H.M.Fines,
do hereby certify that I am the person to	whom is entrusted the paying of the accounts and indebtedness of
Was M A Hines	who was a pensioner of the
State of Texas, and whose file number wa	s 19492 and whose original county was Henduse
10th day of January	, 1925 , in the town of Ben Wheeler,
County of Van Zandt	, Texas.
The pensioner died in the home of	H.M.Hines,
who was related to the pensioner as	son
That the warrant, which application i	s hereby made for, shall be applied to paying all or part of the ex-
penses incurred by the said pensioner	Mrs.M.A.Hines,
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 (Ffix	(d) son
	Ben Wheeler, Street or R. F. D.
	Texas.
City	Signed H M Kine
20.00	Signed 1925.
Sworn to before me thisday o	January 2 7 Danders
	Notary Public in and for Van Zandt State of Texas.
CER	TIFICATE OF UNDERTAKER
	do certify that I am chyderyaker in the
	ty of Van Zandt , State of Texas.
	Mrs.M.A. Hines, , who died in the
	nty of Van Zandt , State of Texas
	192.5 That said body was prepared for burial by me
	, 192.5, and that I am of the opinion that
warrant herein applied for should be issue	ed to the said H.M.Hines,
who makes the foregoing application.	Signed Lutter of Tillmon
	Signed Sulle (,) illust
and the second s	Citizen and neighbonder taket/
CEI	RTIFICATE OF PHYSICIAN
	3
I, Da muy	, do certify that I am a practicing in his last illness, and
	1
am of the opinion that his ailments were	Decelety
,	
I further certify that I am of the opi	inion that the Mortuary Warrant above requested should be issued
in the name of the aforementioned applic	ant, in accordance with Act passed by the Thirty-eighth Legislature,
and approved March 2, 1923.	80 Car
	Signed Type
Physic	cian's Address View Middles Vifila 11
DK.	
00)	Must return bec
	40 days expire
-14-25-	date of Pension
5 5 2 19	Must return before 40 days expires from date of Pensioners' death
0.160	

REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

APPLICATION FOR MORTUARY WARRANT

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	R. D. Pires,	.1	ı	·lbmrs u	eV to steel
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	em wheeler,	to restadt al	2001	January	10 th day of
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	.7º Sel .	· 20 1/1/	WILL TO	his iften day .	Sworn to histore me-

CERTIFICATE OF UNDERTAKER

. do certify that I am Anderraker in the	tlm11	Luther F. Ti	1
Van Zandt . State of Toxes.	County of	LBen Wheeler	town of
the state of the s	A - G T M	charge of the body o	DRU I TRUT
ERROT IN ONE PIFOLLERS OFFICE	lo glano!) .	Pen Wheeler	form of .
Texas Texas Texas Texas Texas Texas Texas Texas	January	10 th, day of	off no
ted moining out to me I ted her . JAMez . 1 1925	January	10 th, day of	on the
soid b.v. Hingay	ald be issued to the	rein applied for shor	warrant he
100	ication	the foregoing appl	who make
Too bong	Si		

It to you and not at the indepth Allet.

CERTIFICATE OF PHYSICIAN

do certify that I am a practicing in his last illness, and

physician, and that i attended ATA III

I further certify that I am of the endated that the Mortany Warrant above requested about he issued in the name of the process attended explicant, in accordance with Act passed by the Thorresignth Legisterium, and approved March 2, 1923.

Langies

en ejed.

Physician's Address