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CONFEDE	RATE PENSI	ON APPLI	CATION.
S. Q	Name of App	plicant,	
Odles	nders	11	County.
Comptroller's	File No. 6	685	
4.2	efully examined		
ALC: CO.	Wat the applicat		
his 16	day of C	ffere	h
Ma	John	uul.	ion Clerk
		- 162	

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

PAYBOOF DLAEKERLING GO., SAN AKTO

## 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,

.Co	OUNTY OF Frencheseus
	the Honorable County Judge of Bunker outounty, Texas.
To	the Honorable County Judge of Jersels Outounty, Texas.
	Your petitioner, respectfully represents that
he	is a resident citizen of Denkerellu County, in the State of Texas, and that he makes this
app	dication for the purpose of obtaining a pension under the act passed by the Twenty-sixth Legislature of the State of
Te:	xas, and approved May 12, A. D. 1899, the same being an act entitled "An act to carry into effect the amendment
to t	the Constitution of the State of Texas, providing that aid may be granted to disabled and dependent Confederate
sol	diers, sailors, and their widows under certain conditions, and to make an appropriation therefor," and I do solemnly
swe	ear that the answers I have given to the following questions are true.
ACCESS ON N	NOTE-Applicant must make answer to all of the following questions, and such answers must be written out plainly in ink.
	o Donal
Q.	What is your name? Answer
Q.	What is your age? Answer
Q.	In what County do you reside? Answer
Q.	How long have you resided in said County and what is your post office address? Answer Town
	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
Q.	Have you applied for a pension under the Confederate Pension Law heretofore, and been rejected? If so state
	when and where. Answer.
Q.	What is your occupation if able to engage in one? Answer 77
Q.	What is your physical condition? Answer Euclide
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 Jufuson all age
Q.	State in what company and regiment you enlisted in the Confederate army, and the time of your service?
	Answer Com Capt Mest Onllery 2 7 cm
Q.	If you served in the Confederate navy state when and where, and the time of your service. Answer
	the control of the co
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.
	as about a result and a control
	Answer
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 I Two head horses of
1 10	walne of \$3000 Coul & Call 9500
	1
	· · · · · · · · · · · · · · · · · · ·
3/3	

## 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 Q. What income, if any, do you receive? Answer. Q. Are you in indigent circumstances; that is, are you in actual want, and destitute of property and means of subsistence? Answer. Q. Are you unable by your labor to earn a support? Answer... Q. Have you transferred to others any property of value of any kind for the purpose of becoming a beneficiary under Q. Did you ever desert the Confederacy? Answer. Q. Have you been continuously since the first day of January, 1880, a bona fide resident citizen of this State? Answer Wherefore your petitioner prays that his application for pension by approved and that such other proceedings be had in the premises as are required by law. (Signature of Applicant) (Nore-There must be at least two credible witnesses.) THE STATE OF TEXAS County, State of Texas, on this day personally appeared me to be credible citizens, who being by me duly sworn on oath, state that they personally know the above named applicant for a pension, and that they 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.

ay of Jame A. D. 189 W. J. Freeman County Judge Denderson Coun

(SEAL)

## REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

	THE STATE OF TEXAS,
	Course of Wenderson . Refore me W. J. Freeman
	COUNTY OF THE PARTY
(	County Judge of June County, State of Texas, on this day personally appeared
	M. C. Alence W , who is a reputable practicing physician of this County, who being
1	me duly sworn on oath, states that he has carefully and thoroughly examined . Ceny
	applicant for a pension, and finds him laboring under the following disabilities which render him unable to labor at any work or call
8	sufficient to earn a support for himself: Sureal dibility-
-	Man a I all
	(Signature of Physician) Thursday
	Sworn to and subscribed before me this day of A. D./
	4.1. F. & seem an
	(SEAL)  County Judge Heiles Que County, State of Tex
	County Judge Fr EUCH County, State of Tex
	CERTIFICATE OF COUNTY JUDGE.
	THE STATE OF TEXAS,
	COUNTY OF OGENCLUSON I W. A. Freeman
ż	County Judge of Oleveluser County, State of Texas, do hereby certify that on the 26 H
	1820
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	The same of the sa
	State, approved May 12, A. D. 1899; that the answers of said applicant to the questions propounded were made under oath as the sa
	ppear in writing in the foregoing application; that the affidavits of the witnesses who are credible citizens were made before me as
	ame hereinbefore appear, and that the foregoing affidavit of Doctor_ N C. Hrence
W	who is a reputable practicing physician of this County, was made before me. I also certify that the said applicant
-	S Classification , is not an inmate of the Texas Confederate Home, nor otherwise disqualif
	nder the provision of Section 12, of the Confederate Pension Law I further certify that after considering all the proceedings had been
	ne relative to the said application for a pension by the said
a	pplicant is lawfully entitled to the pension provided by the Confederate Pension law of this States and I hereby approve said application
	Witness my hand and seal of office at Thurs for this 6
	day of Septem Vel A.D. 899
	W. F. Freeman
	(SEAL)  County Judge Dendersen County, State of Tex
	OFFICIATE OF COUNTY COMMISSIONERS
	CERTIFICATE OF COUNTY COMMISSIONERS.
	THE STATE OF TEXAS,
	COUNTY OF Lindbrian We, the undersigned members of the Commissioners Court
	, ,
٠	Afundament County, Texas, hereby certify that the foregoing application of . Ochry
	for a pension, together with the proof in support thereof, was duly submit
b	y Hon. If Hirleman County Judge of this Henclerson
c	county, to the Commissioners Court of this Senderson County, at a regular term thereof on the
d	ay of MVV A. D. 1879, and after a careful consideration of the same we find the said applicant
18	awfully 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 Athun Tycos this 15
	day of 200 A. D. 1879
	Im yount
	COUNTY (TX)
	(Signatures of Commissioners.)
	(Signatures of Commissioners.)
	(Signatures of Commissioners.)
	A Dolly