FORM B. DEAD

Widow's Application for a Pension

The Commissioner of Pensions reserves the right to call for additional testimony if he deems it necessary.

| Mus. Name of Applicant. |
|----------------------------------|
| amanda 5. Morton |
| Henderson County |
| Postoffice achieves Ty |
| |
| Filed |
| Approved |
| Pension allowed from tune 1-1916 |
| Rejected |
| |
| Commissioner of Pensions. |
| |

Compliments of
East Texas Genealogical Society
www.rootsweb.com/~txetgs

For Use of Widows of Soldiers who are in Indigent Circumstances

| THE STATE OF TEXAS | |
|--|---|
| <i>ff</i> | |
| COUNTY OF GUILDING | |
| I, Mrs. accounty of ma | erlon, do hereby make application to the |
| | ated me under the Act passed by the Thirty-third Legislature of |
| the State of Texas, and approved April 7, A. D. 1913 | 3. on the following grounds. |
| Tomo the mide of | transfer to the second |
| /4 day of Jany , A. D. 1916 , in | the county of Vangarate in the State of |
| I have not remarried since the death of my sai | id husband, and I do solemnly swear that I was never divorced |
| | 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 2 9 day of July AD |
| 1869, in the county of Mugeling | in the State of Les as |
| My husband, the said N.F. Mous | married to him on the 2 day of July , A. D. , in the State of 2 and, enlisted and served in the military service of the Confederate |
| States during the war between the States of the Unite | ed States, and that he did not desert the Confederate Service. |
| I have been a resident of the State of Texas since p | rior to January 1, A. D. 1900, and have been continuously since |
| a citizen of the State of Texas. I do further stat | te that I do not receive from any source whatever money or |
| other means of support amounting in value to t | he sum of \$300.00 per annum, nor do I own in my own right, |
| | use, estate or property, either real, personal or mixed, either |
| | rs, exclusive of the home of the value of not over \$1000.00; nor |
| | , or from the United States, or from any other source, and I do |
| further state that the answers given to the following | g questions are true: |
| 1. What is your age? 73 | ens |
| 2. Where were you born? | opinh Co. Miss |
| 3. How long have you resided in the State of T | exas? 6 5 gre aco |
| 4. How long have you resided in the county o | f your present residence? And what is your postoffice ad- |
| dress? Cuight & Than years- | My Part office is athens, Texas |
| 5. Did your husband draw a pension? If so, g | |
| dy A | Mian translin Morton |
| 7. What was the date of his death? | |
| 8. In what State was your husband's command | |
| 9. How long did your husband serve? If known | oul recumber Low fulfations |
| 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 transferre | d from one branch of sorvice to enother size time of the control of |
| description of command and time of service | |
| COA /M Jugas | Regiment - Roberts Brugase |
| 11. Name branch of service in which your husban | d served, whether infantry, cavalry, artillery, or the navy, or |
| if commissioned as an officer by the President, his ra | ank and line of duty, or if detailed for special service, under |
| the law of conscription, the nature of such service, a | nd time of service |
| infautry- | The was establed for |
| 3 34 - 7/ | |
| a mouth to since | in Machine Shape of Shrenepar |
| 12. Have you transferred to others any property | of any kind for the purpose of becoming a beneficiary under |
| Wherefore your petitioner prays that her appli | cation for a pension may be approved and such other proceed- |
| ings be had in the premises as are required by law. | P A A |
| (Signature of Applic | ant) Monda D Whorlon |
| Sworn to and subscribed before me, this | day of |
| | co ouen |
| [Seal.] | County Judge County, Texas. |
| | |

REPHODUCED PROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

[Note.—There must be at least two creditable witnesses.]

THE STATE OF TEXAS,

AFFIDAVIT OF WITNESSES

COUNTY OF Menderson Before me, County Judge of Tenderson County, County Judge of Tenderson County, State of Texas, on this day personally appeared less. M. Marton & Cuife, who are personally County Judge of Headuron County, known to me to be creditable citizens, who, being by me duly sworn, on oath state that they personally know that Moston, applicant for a pension as the widow of U.F. Marlon 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) Jud Mariton (Signature of Witness) Mrs J. E. Morton Sworn to and subscribed before me, this / 2 day of Will A. D. 191 County Judge Meader of County, Texas. [Seal.] AFFIDAVIT OF WITNESSES [Note.—There must be at least two creditable witnesses.] THE STATE OF TEXAS. COUNTY OF Kenduson County Judge of Lewerson County, Mirton , who are personally State of Texas, on this day personally appeared 4. 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 Muanda & Morlon 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. (Signature of Witness) 900 WW Workow (Signature of Witness) Wr 5 5 Worton 12 day of Chric A. D. 191 6 Sworn to and subscribed before me, this.... County Judge Hunduran County, Texas. [Seal.]

HERRIODUCED FROM THE HOLDINGS OF THE TEXAS STATE AMOHIVES

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.) THE STATE OF TEXAS, COUNTY OF., County Judge of...... Before me,.. State of Texas, on this day personally appeared..... 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 your source of knowledge): (Signature of Witnes).... (Signature of Witnes)... Sworn to and subscribed before me, this.....day of.....day [Seal.] County Judge......County, Texas, CERTIFICATE OF STATE AND COUNTY ASSESSOR I, D. 7 Henry State and County Assessor in the County of Henry State of Texas, do certify that Mrs. Auauda & Marton whose name is signed 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...... Dollars, and of other property, real or personal, or both, of the value of.... Mil A. D. 191 6 Given under my hand, thisday of...

State and County Assessor.

32749

Merch 8th, 1920

Dr. A. H. Easterling, Athens, Texas.

Dear Sir:

Replying to your favor of Mer. 3d:

I am enclosing mortuary warrant application blanks on account of the death of Mrs. Amanda S. Morton, a Confederate pensioner.

Please have these blanks filled out and return to this department, when a worrant for Thirty Dollars will be issued in favor of party filing the claim.

Yours very truly,

Comptroller.



KR. rf

REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

32749

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| Correct fo | AUSTIN | 44 |
| | AUSTIN or the sum of \$ | |
| | AUSTIN or the sum of \$ | |

| STATE OF TEXAS To Let Manual Texas, Male 19. WRITE ADDRESS PLAINLY Account of Death of Pensioner No. 32749 , County Anderson Flather. Pensioner's Name in full Amende S. Morton Account must be itemized, but Mortuary Warrant will not be issued for more than Thirty Dollars 31. 27 5 (MAR 17 1920) | Frank Skenne 475° of 250° | The above account for Cul Audul 2 200, o is just, due and unpaid. Sworn to and subscribed before me this 16 day of Men | Water Privile Huller County, Jenus. |
|--|---------------------------|---|-------------------------------------|
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E. L. STECK, AUSTIN

APPLICATION FOR MORTUARY WARRANT

| County of County | ・ | \mathcal{L} | mh ha | 7 |
|--------------------------------|---------------------------------|-------------------|---|--|
| do hereby certify that I am | | ntwisted the ne | vina of th | more |
| the late manda ; | S. Morton | antiusted the pa | ying of the account | s and indebtedness of |
| State of Texas, and whose fil | e number is 32749 | and whose ori | cinal county is | as a pensioner of the |
| The said pensioner | Amenda S. Morton | • | | • |
| 27 day of Jal | | in the tow | n of attack | , died on the |
| Chairman and War | / . | | | _ ` |
| The pensioner died in the | ie home of Shi | matri | Churchen. | Î. |
| who was related to the pens | ioner as Aa | | | £ |
| That the warrant, which | application is hereby r | nade for, shall b | e applied to paying | r all or part of the av |
| penses incurred by the said p | pensioner Dutt | & Burn | in o | , and of part of the ex- |
| 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. | 0 | / | _ | |
| I am related to the pensi | oner as (Friend) | 2 Ohys | unu | |
| and that my home is in the to | own of While | 2 Co | ounty of | Election 1 |
| State of Sulars | that my postoffice | address is 4 | Thus LX | |
| | <u></u> | | · · | |
| | Signe | ed Co | Energy. | ing End |
| • | , 1, | .4 | | Carlotte Comment of the Street Comment |
| Before me : Mul | elaturna | n Co | ceira | in and for the County |
| of Janderson | State of Texas, personal | ly appeared | | in and for the County |
| , T | who being by me duly sw | vorn did certify | to, and sign the for | regging statement |
| (Seal of Office) | 4 | 9 ") | madela | atman Co |
| | | in and for | | Texas. |
| | | A | | |
| ar V | CERTIFICATE | OF UNDERTA | KER | • |
| I, | | | do certify that I am | an undertaker in the |
| town of | , County of | | State of | an unacreaser in the |
| that I had charge of the body | of | | | who died in the |
| town of | , County of | *************** | , State of | |
| on the day of day of | 1 | 9 That sa | aid body was prepa | red for burial by me |
| on theday of | ******************************* | , 19. | That said bo | ody was buried in the |
| | Cemetery, which is loc | eated in the Cou | nty of | |
| State of | and that I am of | the opinion tha | t warrant herein a | applied for should be |
| ssued to the said | | | | , who makes the |
| oregoing application. | Ciama | | | M. T. |
| | bigne | · | | Undertaker. |
| Δ | *** | | (TX) | |
| () d/, C | CERTIFICATE | OF PHYSICIAN | T & | |
| i, UH Va | stuling | | do certify t | hat I am a practicing |
| physician, and that I attende | d mis affina | Mars m | interior i | n his last illness and |
| m of the opinion that his ailn | nents were | nen | | in the tast illitess, allu |
| | | 0 | | |
| | | | | |
| | | | *************************************** | , |
| I further certify that I a | m of the opinion that tl | he Mortuary Wa | arrant above reque | sted should be issued |
| n the name of the aforementi | oned applicant, in accord | dance with Act | passed by the Thi | rty-fifth Legislature |
| and approved March 2, 1917. | | | . /) | • |
| | Signe | d WH | Caster | Physician. |
| | DL | 6 | 11 4 | , Physician. |
| | Physician's Address | s CY | MILLYK | X |