4/528 DEAD FORM B.

WIDOW'S APPLICATION FOR A PENSION

| The Comptroller of Public Accounts re- |
|--|
| serves the right to call for additional testi- |
| mony if he deems it necessary. |
| |
| Name of Applicant. |
| Mrs. Elizabeth Roker |
| |
| County. |
| R. F. D. or Street No. |
| - All to |
| Postoffice Illustra |
| |
| Filed 7000 16 -1920 |
| Filed 7920 |
| \mathcal{D}_{α} |
| Approved // 16-1925 |
| 8 11 |
| Pension allowed from Chr 1-1920 |
| , / |
| Rejected |
| SIN Terrell |
| Comptroller of Public Accounts. |
| The state of the s |

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

Form 111B

Form 2327b-S524-125-2m

Widow's Application for Confederate Pension

| THE STATE OF TEXAS, | | | | |
|---|--|--|--|--|
| County of Anderson | | | | |
| I, Mrs. Elizheth. Rofu do hereby make application to the | | | | |
| Comptroller of Public Accounts 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 Works deceased, who departed this life on the | | | | |
| 31 day of August, A. D. 1925, in the county of Laurence in the State of | | | | |
| South Carlina | | | | |
| I have not remarried since the death of my said husband,* and I do solemnly swear that I was never di- | | | | |
| vorced 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 10 day | | | | |
| of Ufril , A. D.1865, in the county of Pickers in the State | | | | |
| of Sell. | | | | |
| My husband, the said A. M. | | | | |
| 1. What is your age? 82 years 3 clay at Last Option 2. Where were you born? Pickens Co & C. | | | | |
| 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | | | |
| \mathcal{O} | | | | |
| 18 14 | | | | |
| 5. What is your postoffice address? A. Sankers Lescon 1 14 5 | | | | |
| 6. Did your husband draw a pension? Let If so, give his file number 26074. 7. What is your husband's full name? Andrew Washington Roses. | | | | |
| 8. In what State was your husband's command originally organized? 2607 | | | | |
| | | | | |
| 9. How long did your husband serve? 2607 If known to you, give date of enlistment and discharge 2607 (| | | | |
| 10. What was the name or letter of the company, or number of the regiment 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, (If applicant's husband was a pensioner give his file number, which is evidence sufficient for proof of service.) | | | | |
| 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. | | | | |
| | | | | |
| 2607 X | | | | |
| · | | | | |
| 12. Have you transferred to another any property of any kind for the purpose of becoming a beneficiary under this law? | | | | |
| Wherefore your petitioner prays that her application for a pension may be approved and such other | | | | |
| proceedings be had in the premises as required by law. (Signature of Applicant) Stizleth (hur mark) Rofer | | | | |
| Sworn to and subscribed before me this 3 day of A. D. 1925 | | | | |
| | | | | |
| [Seal.] County Judge County, Texas. | | | | |
| *Where applicant has remarried it is necessary that she state facts covering particulars of last marriage, date, to whom married, and date of last husband's death. She must also state that she is now a widow. | | | | |

REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

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

AFFIDAVIT OF WITNESSES

THE STATE O TEXAS. County of Muder son ., County Judge of.... State of Texas, on this day personally appeared Muss Uluna , who are personally known to me to be credible citizens, who, being by me duly sworn, on oath state that they personally know that Mrse applicant for a pension as the widow of.... deceased, is in truth and fact the widow of ...deceased; that they personally know that she has not remarried since the death of her husband, for whose services in the army she claims a pension, and that they have no interest in this claim. (Signature of Witness)... Sworn to and subscribed before me, this ______day of___ A. D. 192. County Judgellela [Seal.] remarried it is necessary that she state facts covering particulars of last marriage, date, to whom married, and date of last it also state that she is now a widow. AFFIDAVIT OF WITNESSES [Note.—There must be at least two creditable witnesses.] THE STATE OF TEXAS. County of Much County Judge of State of Texas, on this day personally appeared. ,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 has been a bona fide resident citizen of the State of Texas since prior to January 1, A. D. 1910, and that they have no interest in this claim. (Signature of Witness) Sworn to and subscribed before me, this...day of.. ..., A. D. 192

County Judge

[Seal.]

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 appli- |
| cant's husband.) |
| THE STATE OF TEXAS, |

| County of |) | |
|---|--|------------------------------------|
| Before me, | County Judge of | |
| on this day personally appeared | | who |
| | reditable citizens, who, being by me swor | |
| sonally acquainted with the foregoin | ng applicant, and that the facts set forth | and statements made in her appli |
| cation are correct and true, to the be | est of their knowledge and belief, and th | at they have no interest in this |
| | the following facts touching the service | |
| | ur source of knowledge). | |
| | | |
| 1 | | |
| 1 | | |
| | r. 1/0 | , |
| | | · |
| 7 | 011 | · |
| *************************************** | | |
| | | |
| | | |
| /G: | | |
| | nature of Witness) | |
| | nature of Witness) | |
| Sworm to unia supportional perofe | me, thisday of | , A. D. 192 |
| [Goal] | | |
| [Seal.] | County Judge | County, Texas. |
| | | |
| CERTIFICAT | E OF STATE AND COUNTY | ASSESSOR |
| I, K. Ta Dadie | State and County Assessor in the Co | ounty of audien |
| state of Texas, do certify that Mrs | Elizabeth for | whose name is signed |
| o the foregoing application for a per | nsion, under the Act of the Thirty-third | Legislature, approved April 7. |
| 913, is charged on the tax rolls of sa | aid county with a homestead of the valu | e of [#260] |
| I no resided an | Dollars, and of otl | her property, real or personal, or |
| oth, of the value of | Z.Q., Dollars. | |
| Given under my hand, this | 13 day of 1100 | A. D. 19 |
| and the second of | A.R. | Sudur |
| | | State and County Assessor. |

41508

APPLICATION FOR MORTUARY WARRANT

| | THE STATE OF TEXAS, |
|---|--|
| | and Marion Chapter |
| | do hareby contifu that I are the reverse to whom in art at all the second of the secon |
| | do hereby certify that I am the person to whom is entrusted the paying of the accounts and indebtedness of |
| | the late Ma Elizabeth (Koper, who was a pensioner of the State of |
| | Texas, and whose file number was \$\frac{152}{2}\$ and whose original younty was and asom |
| | The said pensioner Mrs Edizabeth Roper, died on the |
| | 17 day of March 1, 1930, in the town of near Francision |
| | County of Underson Zexas. |
| | The pensioner died in the home of farl Coper |
| r | who was related to the pensioner as Sow |
| | That the warrant, which application is hereby made for, shall be applied to paying all or part of the |
| | funeral expenses incurred by the said pensioner Mrs Elizabeth Noken |
| | 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 (Friend) |
| | that my postoffice address is Fraunston houte # 2 |
| | Frankston Street or R. F. D. |
| | City P . State |
| | Signed Gail Otale |
| | Sworn to before me this day of april, 1930 |
| | Carrie Walkins |
| | Must return before Notary Public in and for anderson State of Texas. |
| | O days expires from Notary Public in and for Company State of Texas. |
| | e of Pensioners' death CERTIFICATE OF UNDERTAKER |
| _ | |
| | I, Joseph do certify that I am undertaker in the town of Frankston, County of Auderson, State of Jesas |
| | town of Frankston, County of Mederson, State of Clegas |
| | that I had charge of the body of Mrs Elizabeth Coper, who died in the |
| | town of Frankston, County of anderson , State of Jexas |
| | on the 17 day of March 1930. That said body was prepared for burial by me |
| | on the 18 day of March 1930, and that I am of the opinion that |
| | warrant herein applied for should be issued to the said will to ber |
| | who makes the foregoing application. |
| | Signed Signed |
| | Undertaker. |
| | |
| | CERTIFICATE OF PHYSICIAN |
| | I, A Heathoraugh Mid, do certify that I am a practicing |
| | physician, and that I attended Mrs. Elethqueth, Refuir his last illness, and |
| | am of the opinion that his ailments were |
| | |
| | |
| | |
| | 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 Tolar Manager / Mr. |
| | Physician's Address Poynor Telas 12 |
| | |
| | |

3-26230

GOMPTROLLERS OFFICE RECEIVED APR 2 1930

MARTING OF THE PROPERTY OF THE