

Should be Forwarded to Comptroller.

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FORM NO. 1.

CONFEDERATE PENSION APPLICATION.

Name of Applicant

Name of Applicant

Post Office

Compitolier's File No.

There carefully examined the within application for pension, together with the proof in support thereof and recommend that the application be

Computed that the application be

C. R. B. M. B. L. B.

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APPLICATION of Indigent Soldier or Sailor of the late Confederacy for pension under the Act of May 12, 1899.

| T | HE STATE OF TEXAS, | | | | | |
|--|--|--|--|--|--|--|
| Со | UNTY OF Junih | | | | | |
| То | the Honorable County Judge of County, Texas. | | | | | |
| | Your petitioner, Robert M. Kay respectfully represents that | | | | | |
| he i | s a resident citizen of County, in the State of Texas, and that he makes this | | | | | |
| app | lication for the purpose of obtaining a pension under the act passed by the Twenty-sixth Legislature of the State of | | | | | |
| Тех | cas, and approved May 12, A. D. 1899, the same being an act entitled "An act to carry into effect the amendment | | | | | |
| to the Constitution of the State of Texas, providing that aid may be granted to disabled and dependent Confederate | | | | | | |
| | liers, sailors, and their widows under certain conditions, and to make an appropriation therefor,' and I do solemnly ar that the answers I have given to the following questions are true. | | | | | |
| | NOTE—Applicant must make answer to all of the following questions, and such answers must be written out plainly in ink. | | | | | |
| Q. | What is your name? Answer. Robert M. Kay | | | | | |
| Q. | What is your age? Answer 76 years als | | | | | |
| 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 #5-years Winoua Tufas. | | | | | |
| 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 Selling bootto | | | | | |
| Q. | What is your physical condition? Answer Janly 9000 | | | | | |
| 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 Lawrence Lawr | | | | | |
| Q. | State in what company and regiment you enlisted in the Confederate army, and the time of your service? | | | | | |
| | Answer Ordinaries Defarfment Col. Hill Commander Caffair Palleys Company. Two years. If you served in the Confederate navy state when and where, and the time of your service. Answer | | | | | |
| Q. | If you served in the Confederate navy state when and where, and the time of your service. Answer | | | | | |
| | $\mathcal{A}\mathcal{A}$ | | | | | |
| 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. | | | | | |
| | 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 & and more real more | | | | | |
| | firsand proporty whohim if eit an | | | | | |
| | ow horse and briggy work about 930 - | | | | | |
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| | | | | | | |

| Q. What property, and what was the | value thereof have y | ou sold or conveyed w | rithin two years p | rior to the date of |
|--|------------------------------|----------------------------|---------------------------------------|--|
| this application? Answer | I recent | y sold as | v mid | ivided |
| this application? Answer | n a Tro | et of la | ed for | \$5000 |
| Q. What income, if any, do you receiv | ve? Answer | for | e e | |
| Q. Are you in indigent circumstances | | ctual want, and destitu | te of property an | d means of subsis- |
| tence? Answer | Jev | | · · · · · · · · · · · · · · · · · · · | |
| Q. Are you unable by your labor to ea | arn a support? Answ | ver yer | / | |
| Q. Have you transferred to others any | | | | |
| this law? Answer | 10 | | | |
| Q. Did you ever desert the Confederac | cy? Answer | 10 | | |
| Q. Have you been continuously sin | | | a fide resident ci | tizen of this State? |
| Answer | yes | | | · |
| Wherefore your petitioner pray | //vs that his applicatio | n for pension be approv | ved and that such | other proceedings |
| be had in the premises as are required | | | | |
| be fluid in the premises as are required. | (Signature of Applica | nt) | RM | 1/204 |
| Sworn to and subscribed before | me this | day of | an. | AD 1961 |
| Sworn to and subscribed before | : Me tills | e, In | | |
| (000.00) | | JU. 1 | - | |
| (SEAL) | | County Judge | not | County, Texas. |
| | | | | |
| | AFFIDAVIT OF | F WITNESSES. | , | |
| | 4/ | · | , | |
| (Note-There must be at least two credible | witnesses.) | | | |
| THE STATE OF TEX | | _ | P | |
| COUNTY OF | Befo | ore me, Jw. W | - Cra | w |
| County Judge of | - | exas, on this day personal | | |
| J.M. Daver | sport & | J. Ha | millo | w |
| who are personally known to me to be cr | redible citizens, who be | ing by me duly sworn o | on oath, state that | they personally know |
| 1. M. Ka | 7 | the above name | d applicant for a p | ension, and that they |
| personally know that the said | 1 10.99. | Kay | enlisted | l in the service of the |
| Confederacy, and performed the duties of a | soldier (or sailor) as clair | med by him in the above | and foregoing appli | cation, and that they |
| further know that he, the said applicant, is | unable to support himse | If by labor of any sort. | | |
| | (Signature of Witn | ness) | averefor | nd- |
| The second secon | (Signature of Witz | ness) 41 | Januel 1 | |
| | | 00 | | |
| | (Signature of Witr | 1 es s) | • | |
| | (Signature of Witr | 1ess) | | |
| Sworn to and subscribed before me th | his & day | of Jonn | A. D | 1901 |
| | | O Gw | M. C | wal |
| (SEAL) | - | County Judge | Smit | County, Texas. |
| | | | | * * |

AFFIDAVIT OF PHYSICIAN.

| THE STATE OF TEXAS, | \mathcal{A} |
|--|---|
| | ne. Groth. Cross |
| Dr. J. H. Davenfort, who is | a reputable practicing physician of this County, who being by |
| me duly sworn on oath, states that he has carefully and thoroughly examapplicant for a pension, and finds him laboring under the following disab | |
| sufficient to earn a support for himself: that he ables by again | |
| | |
| | |
| (Signature of Physicia | |
| Sworn to and subscribed before me this day of | Jan. A.D. 1901 |
| (SEAL) | Judge County, State of Texas, |
| CERTIFICATE OF CO | DUNTY JUDGE. |
| THE STATE OF TEXAS, | |
| COUNTY OF STATE 1, | Gu. H. Cross |
| County Judge of County day of A. D. 190 | y, State of Texas, do hereby certify that on the |
| State, approved May 12, A. D. 1899; that the answers of said applicant to | for a pension under the Confederate Pension Law of this |
| appear in writing in the foregoing application; that the affidavits of the | |
| same hereinbefore appear, and that the foregoing affidavit of Doctor who is a reputable practicing physician of this County, was made before | med I also certify that the said applicant |
| under the provision of Section 12, of the Confederate Pension Law. I fu | inmate of the Texas Confederate Home, nor otherwise disqualified |
| me relative to the said application for a pension by the said | 1. M. May I find the said |
| Witness my hand and seal of office at | 19 this 2 |
| day of Hand | En n Cross |
| (SEAL) . Count | y Judge Scriff County, State of Texas. |
| CERTIFICATE OF COUNT | Y COMMISSIONERS. |
| THE STATE OF TEXAS, | |
| ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | We, the undersigned members of the Commissioners Court of |
| | sion, together with the proof in support thereof, was duly submitted |
| by Hon, J. Jes. W. Orozz County, to the Commissioners Court of this Drunk | County Judge of this Suit. County, at a regular term thereof on the 16th |
| day of A.D. 1901, and after | a careful consideration of the same we find the said applicant is |
| lawfully entitled to the pension provided for by the Confederate Pensio Witness our hands and seal of office at | Tyler Ive this 16th |
| day of | Withchart A |
| | J. J. Garner 0 |
| (Signatures of Commissioners.) | Def Epperron 3 |
| (SHAL) | My Brown 5 4 |