

6

Indorsements Hereon for Comptroller's Use Exclusively.

8427  
~~DEAD~~ FORM NO. 2.

CONFEDERATE PENSION APPLICATION.

Name of Applicant

Mrs. S. F. Lewis

Smith

County

Post Office

Rowland, Tex.

Comptroller's File No.

8903

I have carefully examined the within application for pension together with the proof in support hereof and I recommend that the application be

Approved 11-23-26

this

31 day of March

A. D. 1902

B. A. Palmer  
Pension Clerk

I hereby \_\_\_\_\_ this application for pension, this MAR 31 1902 day of \_\_\_\_\_ A. D.

A. M. Lawrence  
Comptroller

No Application rejected by County Judge or County Commissioners should be forwarded to Comptroller.

STATE OF TEXAS, DALLAS COUNTY, TEXAS

REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES



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

THE STATE OF TEXAS,

COUNTY OF *Smith*

To the Honorable County Judge of *Smith* County, Texas.

Your petitioner, Mrs. *L. F. Lewis* respectfully represents that she is a resident citizen of *Smith* County, in the State of Texas, that she is the widow of *J. D. Lewis* deceased, who was a Confederate soldier (or sailor), and that she makes this application for the purpose of obtaining a pension as the widow of said *J. D. Lewis* deceased, under the act passed by the Twenty-sixth Legislature of the State of Texas, 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 soldiers, sailors, and their widows under certain conditions, and to make an appropriation therefor," and I do solemnly swear 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 *Mrs L. F. Lewis*
- Q. What is your age? Answer *63 years past*
- Q. In what County do you reside? Answer *Smith*
- Q. How long have you resided in said County and what is your post office address? Answer *24 June Bullard, Texas,*
- Q. Have you applied for a pension under the Confederate Pension Law heretofore, and been rejected? If so state when and where. Answer *No.*
- Q. What is your occupation if able to engage in one? Answer *House Keeping*
- Q. What is your physical condition? Answer *Fairly good*
- Q. What was the name of your deceased husband? Answer *J. D. Lewis*
- Q. Were you married to him anterior to March 1, 1866? If so, on what date were you married to him and where? Answer *Yes - July 3<sup>rd</sup> 1855 - Barber Co. Ala.*
- Q. What was the date of his death? Answer *Aug. 27 - 1901.*
- Q. Are you unmarried, and have you so remained unmarried since the death of your said husband for whose services you claim a pension? Answer *Yes - yes -*
- Q. State in what company and regiment your deceased husband for whose services you claim a pension enlisted in the Confederate army, and the time of his service therein? Answer *Company "A" 45<sup>th</sup> Alabama, Regt - Infantry - 3 years*
- Q. If your deceased husband served in the Confederate navy, state when and where, and the time of such service? Answer \_\_\_\_\_
- 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 so received. Answer *None*





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 have no real estate nor personal property.*

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 *None*

Q. What income, if any, do you receive? Answer *None*

Q. Are you in indigent circumstances; that is, are you in actual want, and destitute of property and means of subsistence? Answer *yes*

Q. Are you unable by your labor to earn a support? Answer *yes*

Q. Have you transferred to others any property of value of any kind for the purpose of becoming a beneficiary under this law? Answer *No*

Q. Did your deceased husband for whose services you claim a pension, ever desert the Confederacy? Answer *No*

Q. Have you been continuously since the first day of March, 1880, a bona fide resident citizen of this State? Answer *yes*

Wherefore your petitioner prays that her application for pension be approved and that such other proceedings be had in the premises as are required by law.

(Signature of Applicant)

*L. F. Lewis*

Sworn to and subscribed before me this *4* day of *Feb.* A. D. *1902*

*Geo. W. Cross*

(SEAL)

County Judge *Smith* County, Texas.

**AFFIDAVIT OF WITNESSES.**

(NOTE—There must be at least two credible witnesses.)

THE STATE OF TEXAS,

COUNTY OF *Smith* } Before me, *Geo. W. Cross*

County Judge of *Smith* County, State of Texas, on this day personally appeared *S. A. Smith and E. W. Harrison*

who are personally known to me to be credible citizens, who being by me duly sworn on oath, state that they personally know that Mrs. *L. F. Lewis* applicant for a pension as the widow of

*J. D. Lewis*, deceased, is in truth and fact the widow of the said

*J. D. Lewis*, deceased; that they personally know that the said

*J. D. Lewis*, deceased, enlisted in the service of the Confederacy, and performed the duties of a soldier (or sailor) as claimed by his said widow in the above and foregoing application, and that they further know that the said Mrs. *L. F. Lewis* widow of the said

*J. D. Lewis*, deceased, is unable to support herself by labor of any sort.

(Signature of Witness)

(Signature of Witness)

(Signature of Witness)

(Signature of Witness)

*S. A. Smith*  
*E. W. Harrison*

Sworn to and subscribed before me this *4* day of *Feb.* A. D. *1902*

*Geo. W. Cross*

(SEAL)

County Judge *Smith* County, Texas.



CERTIFICATE OF COUNTY JUDGE.

THE STATE OF TEXAS,

COUNTY OF Smith } I, Geo. W. Cross  
County Judge of Smith County, State of Texas, do hereby certify that on the 4<sup>th</sup>

day of Feb. A. D. 1902, before me came on to be heard the application of  
Mrs. L. F. Lewis, widow of J. D. Lewis

deceased, for a pension under the Confederate Pension Law of this  
State, approved May 12, A. D. 1899; that the answers of said applicant to the questions propounded were made under oath as the same  
appear in writing in the foregoing application; that the affidavits of the witnesses who are credible citizens were made before me as the  
same hereinbefore appear. I also certify that the said applicant Mrs. L. F. Lewis

is not disqualified under any of the provisions of Section 12, of the Confederate Pension Law. I further certify that after considering all  
of the proceedings had before me relative to the said application for a pension by the said Mrs. L. F. Lewis  
L. F. Lewis as widow of J. D. Lewis

deceased, I find the said applicant is lawfully entitled to the pension provided for by the Confederate Pension Law of this State, and I  
hereby approve said application.

Witness my hand and seal of office at Tyler, Tex. this 4<sup>th</sup>  
day of Feb. A. D. 1902

(SEAL)

Geo. W. Cross  
County Judge Smith County, State of Texas.

CERTIFICATE OF COUNTY COMMISSIONERS.

THE STATE OF TEXAS,

COUNTY OF Smith } We, the undersigned members of the Commissioners Court of  
Smith County, Texas, hereby certify that the foregoing application of Mrs. L. F. Lewis

widow of J. D. Lewis deceased, for a pension  
together with the proof in support thereof, was duly submitted by Hon. Geo. W. Cross

County Judge of this Smith County, to the Commissioners Court of this Smith

County, at a regular term thereof on the 20<sup>th</sup> day of Feb. A. D. 1902, and after a careful

consideration of the same we find the said applicant is lawfully 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 Tyler, Tex. this 20<sup>th</sup>  
day of Feb. A. D. 1902

(Signatures of Commissioners.)

W. J. Harland 1  
J. J. Garnett 2  
J. Apperson 3  
W. G. Brown 4

(SEAL)

### APPLICATION FOR MORTUARY WARRANT

THE STATE OF TEXAS,

County of Smith } I, Mrs. E.W. Fellman

do hereby certify that I am the person to whom is entrusted the paying of the accounts and indebtedness of the late Mrs. L.F. Lewis, who was a pensioner of the State of Texas, and whose file number was 8927 and whose original county was Smith.

The said pensioner Mrs. L.F. Lewis died on the 12 day of Nov, 1926, in the town of Bullard County of Smith, Texas.

The pensioner died in the home of Mrs. E.W. Fellman who was related to the pensioner as Daughter.

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. L.F. Lewis.

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) Daughter that my postoffice address is Bullard

Street or R. F. D. Texas State

City

Signed Mrs. E. W. Fellman

Sworn to before me this 14 day of December 1926

Notary Public in and for Smith State of Texas.

### CERTIFICATE OF UNDERTAKER

I, J. A. Campbell, do certify that I am undertaker in the town of Bullard, County of Smith, State of Texas, that I had charge of the body of deceased body for Mrs. L.F. Lewis, who died in the town of Bullard, County of Smith, State of Texas on the 12 day of November, 1926. That said body was prepared for burial by me on the 12 day of November, 1926, and that I am of the opinion that warrant herein applied for should be issued to the said Mrs. E.W. Fellman who makes the foregoing application.

Signed J. A. Campbell Undertaker.

### CERTIFICATE OF PHYSICIAN

I, Dr. B. Rafter, do certify that I am a practicing physician, and that I attended Mrs. L.F. Lewis in his last illness, and am of the opinion that his ailments were Pneumonia - & Debility.

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 Dr. B. Rafter TX

Physician's Address Bullard Texas

Must return before 40 days expires from date of Pensioners' death

*was assent and returned*  
*OK.*  
*11-23-26*  
*8927*



# APPLICATION FOR MORTUARY WARRANT

THE STATE OF TEXAS

County of Wichita  
do hereby certify that I am the person to whom is entrusted the carrying of the accounts and indebtedness of the estate of John J. Williams who was a pensioner of the

State of Texas and whose file number was 102-1-100 and whose original county was Wichita and who died on the

day of July 1926 in the town of Wichita County of Wichita Texas.

The pensioner died in the home of John J. Williams and was related to the pensioner as husband

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

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) John J. Williams that my postoffice address is Wichita, Texas

City Wichita State of Texas

Signed John J. Williams day of July 1926 Sworn to before me this

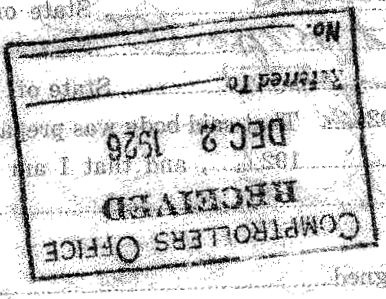
Notary Public in and for State of Texas

## CERTIFICATE OF THE UNDERTAKER

I do certify that I am undertaker in the town of Wichita County of Wichita State of Texas

that I have charge of the body of John J. Williams who died in the town of Wichita County of Wichita State of Texas on the day of July 1926 on the day of July 1926

warrant herein applied for should be issued to the said John J. Williams who makes the foregoing application.



Signed John J. Williams Undertaker

## CERTIFICATE OF PHYSICIAN

I do certify that I am a practicing physician and that I attended John J. Williams in his last illness, and am of the opinion that his ailments were John J. Williams

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 John J. Williams Physician's Address Wichita, Texas

