

THIS APPLICATION

Must be Filed with the Chancery Clerk on or before the First Monday in September

(NO APPLICATION WILL BE RECEIVED UNLESS FILLED WITHIN THIS TIME)

FORM No. 6.

APPLICATION of Indigent, Servant, of Soldier or Sailor of the late Confed-
eracy, under Chapter 73, Acts of 1906, for \$20.00.

Applicant must make Answer to all of the following questions and have it written out Plainly in Ink.

- Q. What is your name? Answer *Banister Anderson*
- Q. What is your Age? Answer *69 years*
- Q. How long have you been a bona fide resident of Mississippi? Answer *with Union War 1861*
- Q. In what county do you reside? Answer *DeSoto*
- Q. What is the name of your post-office? Answer *Alpha*
- Q. In what State did you reside when you served as a servant of a soldier or sailor in the service of the Confed-
erate States? Answer *DeSoto County - Miss*
- Q. When did you serve in that capacity? Answer *1861, 1862, 1863 & 1864*
- Q. How long did you serve? Answer *3 years*
- Q. What was the name of party whom you served? Answer *John Anderson*
- Q. What was the name or designation of the company and regiment or vessel in which your owner served?
Answer *42nd Miss Reg in Company D*
- Q. Where were you at the close of the war? Answer *in Miss. at home*
- Q. Were you ever wounded while in active service? Answer *Yes*
- Q. Give date on which you received your wound? Answer *at battle Chickamunga*
- Q. At what place were you wounded? Answer *Chickamunga*
- Q. What is the nature of your wound? Answer *Arm broken at elbow joint*
- Q. Have you lost one foot or one hand? Answer *No*
- Q. Have you lost entire use of one foot or one hand? Answer *Yes of right arm*
- Q. If you have lost one foot or one hand, was such loss caused by wounds or injuries received while enlisted in the
Confederate army? Answer *Yes*
- Q. Do you apply for a pension because you are indigent and unable to earn a support by your own labor? Answer
Yes
- Q. Do you hold any State, United States, County, or City office from which you are receiving as salary or fees the
sum of three hundred dollars per annum? Answer *No sir*
- Q. Are you worth in your own right, or in the right of your wife, property at its assessed value for taxation to the
amount of four hundred dollars? Answer *No sir*

Banister Anderson
(Signature of applicant.)

Sworn to and subscribed before me, this *3* day of *Aug* A. D. 19*05*

Am Landisdale J. O.
(Signature of officer.)

I do solemnly swear, or affirm, that I was a Confederate soldier, sailor or servant; that I was honorably discharged, paroled, or did not desert from
the Confederate service; that I reside in this State; that I am indigent and infirm; by reason of service in the Confederate army or navy; that I am not
able to earn a support; and have no relatives able, whose legal or moral duty it is to support me; that I do not own property, real or personal,
in my own name or that of my wife, to the value of four hundred dollars; that I have not conveyed any of my property to any one with a view of deriving a
pension. So help me God.

(Signature of Pensioner) *Banister Anderson*

Sworn to and subscribed before me, this *3rd* day of *Aug* 19*05*

Am Landisdale J. O. Chancery Clerk.

AFFIDAVIT OF TWO WITNESSES

We, the undersigned, verify that the facts stated in the above application to be true and the applicant to be the identical person named in the said application.

Sworn to and subscribed before me, this 3rd day of Aug, A. D. 1903

Ann Landerdale
(Signature of officer)

R. B. Benjamin
(Signature of witness)
J. R. Vaiden
(Signature of witness)

Office of Chancery Clerk and County Board of Inquiry DeWitt County, DeWitt

Raymond Miss DeWitt 5 03

We, the undersigned members of the Board of Inquiry, hereby approve the foregoing application of Benjamin Anderson for pension for \$50.00

because we know the applicant to be indigent and physically unable to earn a support by his own labor, on account of wounds or injuries received during the civil war, and that we believe the facts stated in the above application are true and the party should receive the pension.

Given under our hands and seals of office, this 8th day of Sept, 1903

W. H. Whelan [SEAL] President of Board.
N. P. Hughes [SEAL]
J. S. Hutchins [SEAL]

J. R. Whelan
Chancery Clerk

J. R. Whelan [SEAL] Chancery Clerk

N. B.—If the Board approves this application, the Chancery Clerk will so certify, after recording the same in a book kept for that purpose, and forward all of the approved applications in a book and one at a time to the Auditor's office by the first day of October.

No application forwarded after that time will be received.

The undersigned hereby certifies that the above applicant is indigent and physically unable to earn a support by his own labor.

J. M. Jones G. H. O.

Pension Application

DeWitt County

Benjamin Anderson

Benjamin Anderson

Form No. 6

SPECIAL INSTRUCTIONS TO CHANCERY CLERKS:

No application will be returned unless made out in proper form and every blank in the form filled by hand.

Not returned
3rd Sept 1903
J. R. Whelan

APPLICATION FOR PENSION

How Made: What to Contain: Description of Disabilities: Oath Prescribed

Form No. 5

General Proviso Class

Application of indigent servants of Soldier or Sailor of the Late Confederacy, under Chapter 102 of Code 1906 as amended by Laws April 5th 1910 and Laws March 24th 1910. Sec. 1 of Laws 1916 being as follows: "Be it enacted by the Legislature of the State of Mississippi that all applications for pensions heretofore made and filed, be and same are hereby declared void, and any person desiring to share in the future distribution of the pension fund, shall on or before the first Monday in September 1916, file a new application, using blanks to be furnished by the Auditor of Public Accounts through the Chancery Clerks of the various counties."

Applications must be filed with the Chancery Clerk on or before the first Monday in September 1916, and no application will be entertained nor on the printed form.

(Applicant must make answer to all of the following Questions.)

- Q. What is your name? Answer: Banister Anderson.
- Q. What is your age? Answer: 85 years.
- Q. Are you a bona fide resident of the State of Mississippi? Answer: Yes.
- Q. How long have you been a bona fide resident of Mississippi? Answer: Since wax 1861.
- Q. In what county do you reside? Answer: DeSoto.
- Q. What is the name of your postoffice? Answer: Coldwater, Miss., R.F.D. No. 5.
- Q. In what State did you reside when you served as a servant of a soldier or sailor in the service of the Confederate States? Answer: State of Virginia.
- Q. When did you serve in that capacity? Answer: 1861, 1862, 1863 & 1864.
- Q. How long did you serve? Answer: 2 years.
- Q. What was the name of the party whom you served? Answer: John Anderson.
- Q. What was the number of the regiment or name of the vessel in which your owner served? Answer: 42nd Miss., Reg. in Company "D".
- Q. The name of its commander? Answer: Col. Millers Reg., Joe Davis, Brigade.
- Q. Letter or designation of the company in which your owner served? Answer: Co. "D".
- Q. Name of its captain? Answer: Captain Look, (Bob Look)
- Q. Where were you at the close of the war? Answer: in Virginia.
- Q. Were you ever wounded while in actual service? Answer: Yes. Chickamauga.
- Q. Give date on which you received your wound? Answer: 1st of Sept. at battle of /
- Q. At what place were you wounded? Answer: Chickamauga.
- Q. What is the nature of your wound? Answer: Arm broken at elbow joint, right arm, cant bend it, have lost entire use of same.
- Q. Do you apply for a pension because you are indigent and unable to earn a support by your own labor? Answer: Yes.
- Q. Do you hold any State, United States, County, or City office from which you are receiving as salary or fees amounting to the sum of three hundred dollars? Answer: No.
- Q. Are you worth in your own right, or in the right of your wife, property the true, just and correct value of which amounts to four hundred dollars? Answer: Have nothing.

Sworn to and subscribed before me this 17th day of July A. D. 1916
Banister Anderson
 (Signature of Applicant)
R. C. Clifton
 (Signature of Officer)

"I do solemnly swear (or affirm) that I was a Confederate soldier, sailor or servant of such Confederate soldier or sailor (as the case may be); that I was honorably discharged or paroled, or did not desert from the Confederate service (as the case may be); that I reside in this State; that I am indigent and infirm; that I am not able to earn a support, and have no relatives able, whose duty it is to support me; that I nor my wife do not own property, real or personal, to the value of six hundred dollars (\$600); that I nor my wife have not conveyed any of my or her property to any one with a view to drawing a pension, so help me God."

(Signature of Pensioner) Banister Anderson
 Sworn to and subscribed before me, this 17th day of July A. D. 1916
R. C. Clifton
 Chancery Clerk.

ATTEST
 I, *R. C. Clifton*
 Chancery Clerk.

In a book
Office by

1861
 Dec 1861

AFFIDAVIT OF TWO WITNESSES

I, the undersigned, do hereby certify that the person named in the above application to be received the applicant is the identical person named in the said application.
 Sworn to and subscribed before me this 11th day of September, 1916.
 (Signature of Officer) *[Signature]* (Signature of Witness) *S. P. Hunt*
 (Signature of Witness) *J. M. Anderson*

Office of Chancery Clerk and County Board of Inquiry, De Soto County

Forwards Sept 11 1916

We, the undersigned members of the Board of Inquiry, hereby approve the foregoing application of *Barnister Anderson* for pension because we know the applicant to be indigent and physically unable to earn a support by his own labor, and account of wounds and injuries received during the Civil War, and that we believe the facts stated in the above application are true and the party should receive a pension.

Given under our hands and seats of office, this 11th day of Sept 1916

[Large handwritten signature]
 ATTEST

[Signature] (Seal)
 President of Board
[Signature] (Seal)
[Signature] (Seal)
[Signature] (Seal)
[Signature] (Seal)
[Signature] (Seal)
 Chancery Clerk

N. B. - If the Board approves this application, the Chancery Clerk will so certify, after recording the same in a book kept for that purpose, and forward all of the approved applications in a body (not one at a time) to the Auditor's office by the first day of October.
 No application forwarded after that time will be received.
 Rejected applications should not be forwarded to this office.

Pension Application	
<i>De Soto</i>	County
Name of Applicant <i>Barnister Anderson</i>	
Postoffice <i>Caldwells R.F.D. #5</i>	
No. of Application	
Form No. 5	
Special Instructions to Chancery Clerks No application will be entertained unless made on the proper form and every blank in the form properly filled out.	
<i>Received at De Soto 11/16</i>	
<i>R. B. Elliott</i>	
ALLOWED	