## APPLICATION FOR PENSION

## FORM NO. 2-WIDOWS

## MARRIED BETWEEN 1866 AND 1875

## FOR \$150.00 PER YEAR

Application of Widow of Soldier or Sailor of the Late Confederacy, under H. B. 11,1928.

Q. 3. In what state and county do you reside? Answer Mersiscippi, DoSoto County
Q. 4. How long have you resided in Mississippi? Born and lived in Miss., all her natural

Q. 5. What is the name of your postofnee? Answer Hermando, Miss. R 1.

1. What is your name? Answer \_\_\_Mrs. J. H. Boggan

O. 2. What is your age? Answer \_\_\_\_\_

Yes

0

Application must be filed in duplicate with the Chancery Clerk on or before the first Monday in September of the year in which application is first filed.

(Applicant must answer all of the following questions.)

78 Years

		(Yes or No)					
	7.	What was your husband's name? Answer J. H. Boggan					
	8	8. When were you married? Answer large 31, 1372					
	0.	9. Where were you married? Answer DeSoto County, Miss.					
	9.	Have you since remarried? Answer No					
	10.	Have you since remarried: Answer (Yes or No)					
Ü	11.	Are you an inmate of the Beauvoir Soldiers' Home? Answer					
		(les of No)					
	12. Was your husband a bona fide citizen of the United State and of the State of Mississippi?						
		Answer(Yes or No)					
		What was the date of your husband's enlistment? Answerlearch 7, 1864					
	13.	What was the date of your nuscand's emistrical: Answer Give place of his enlistment. Answer Hernando, Eississippi					
	15.	Give the names of officers of his company, regiment or vessel?					
		Give the names of others of his company, regiment or vessel.  Answer Capt. R. R. West, Lieut Walker					
	16.	Was he ever discharged from his command? Answer					
	17. If so, for what cause? Answer (Yes or No)						
٠	14.	17. If 80, for what cause: America					
į.	18.	Was he in active service at the surrender in 1855? AnswerYas, in prison at Memphis,					
	19.	If not, why? Answer(Yes or No)					
		(* 17.00-10.00)					
	20.	. What is your net income? Answer None					
15	);t ny b the	the solemnly swear (or affirm) that I am a widow of a Confederate Solder or Sallor (as the case me has he was homorably discharged or paroled, or did not desert from the Confederate service (as the case); that I reside in this State; that the statements set forth in the application are true and correspond to the supplication of Pensioner).  (Signature of Pensioner)  Which day of August 1950. 2052  When the Sallor of Chancery Clerker C					

AFFIDAVIT-We, the e identical person named Sworn to and subscrib	2017	ets stated in the above application are to	rue and the applicant
Sworn to and subscrib	ed before me, this	(Sprature of Wild	(ts) _O
of augus	1990	0721	maschall
WAR	0	(Signature of Witz	ees)
Signat	ture of Officer.) Elinh	(Signature of Wite	ness)
OTE-Must be attested h	ny one or more creditable witnesse	s. (Signature of Witz	:035)
		mers of H Ba	ggun
	30	· · Que I	20
Sworn to and subscrib	ed before me, this	day of June 1	192
		W.Z. Brown (Signature of Offi	cer)
FICE OF CHANCERY	CLERK AND COUNTY BOARD O	F INQUIRYDeSoto	_ COUNTY
Ternando	, MISS	September Sth	19/30
Given under our hands	and seal of office, this	President of Board.  Pare Barry St.  Other Comments.  Peteran of World War.	(Seal) (Seal) Chargery (Seal) (Seal) (Seal) (Seal) (Seal)
	-	Chancery Clerk.	(Seal)

PENSION APPLICATION

DeScato. Causty

Name of Applicant

Mrs. J. H. Boggan

Festelles

Hernando, Miss. Route 1

No. of Application

FOREN NO. 3-WIDOWS

Special Instructions to Chancery Christ

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