## Application for Pension

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

Form No. 4-SOLDIERS and SAILORS

## PRORATE

Application of Soldier or Sailor of the Late Confederacy, under Chapter 108, Code of 1906 as amended by Laws of March 13, 1922, H. B. 382.

Applications 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.)   |
|-----|---|
| Q.  | What is your name? Answer Wie a Kalehite  |
| Q.  | In what county and state do you reside? Answer De Soto County, Mississip  |
| Q.  | What is the name of your Post Office? Answer Love Station, miss   |
| Q.  | Are you a bona fide citizen of the United States? Answer  |
| Q.  | Are you a bona fide citizen of the State of Mississippi? Answer   |
| Q.  | Are you an inmate of the Beauvoir Soldiers' Home? Answer  |
| Q.  | What was the date of your enlistment? Answer September 1863   |
| Q.  | In what state, county and place did you reside when you enlisted?   |
|     | Answer Mississippi De Soto County Love Station, mis   |
| Q.  | Give the names of the officers of your company, regiment or vessel?  Answer 6ast Perry  |
| Q.  | Were you ever discharged from your command Answer   |
| Q.  | If so, for what cause? Answer   |
| Q.  | Were you in active service at the surrender in 1865? Answer   |
| Q.  | If not, why? Answer   |
| tha | "I do solemnly swear (or affirm) that I was a Confederate soldier or sailor (as the case may be); that I is honorably discharged or paroled or did not desert from the Confederate service (as the case may be); it I reside in this State; that statements set forth in application are true and correct I verily believe; so pime God." |
|     | (Signature of pensioner)  |
| I   |   |
|     | Sworn to and subscribed before me, this 26 day of cuy, 1927   |
|     | Rlokolytow Chancery Clerk   |
|     |   |

|   | the store application to be true and the applicant   |
|---|--|
| se identical person named in the said application.  | (Signature of Witness)   |
| rn to and subscribed before me this   | JISTIMUS holl  |
| aug 100 2   | (Signature of Witness)   |
| D. CO. O. o.  |  |
| (Signature of Officer)  | (Signature of Witness)   |
| •   | 9 WH.  |
| E-Must be attested by one or more creditable witnesses.   | (Signature of Witness)   |
|   |  |
| 01  | (Signature of applicant)   |
| 16  | ly 9 192   |
| Sworn to and subscribed before me, thisday of   | Mary - Cex   |
|   | (Signoture of officer)   |
|   | (Signature of Oliver)  |
|   | n 0+   |
| DI  | V/XUEDOCCOUNTY   |
| TOTAL CHANCERY CLERK AND COUNTY BOARD OF INQUIR   | 1 11   |
| Winanda Mise  | 192  |
|   |  |
| the andersigned members of the Board of Inquiry, hereby approve                                     | e the foregoing application of   |
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| Tor pension secaus  | se we believe the racis award in the ablu-   |
| on and frue and the thriv should receive a punatum  | 7  |
|   | each of sh   |
| Given under our hands and seal of office, this  | GOA 192 2 1  |
|   | - TEV  |
| on are true and the party should receive a pension.  Given under our hands and seal of office, this | - TEV  |
|   | Marison (Seal) 2 8   |
|   | President of Board (Seal)  |
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|   | President of Board (Seal)  (Seal)  (Seal)  (Seal)  (Seal)  (Seal)  (Seal)  |
|   | President of Board (Seal)  (Seal)  (Seal)  (Seal)  (Seal)  (Seal)  (Seal)  |
| Given under our hands and seel of office, this.   | (Seal) President of Board, (Seal) (Seal) (Seal) (Seal) (Seal) (Seal) (Seal) (Chancery Clerk.                               |
| Given under our hands and seel of office, this  | (Seal)  President of Board, (Seal)         |
|   | (Seal)  President of Board, (Seal)  (Seal) |
| Given under our hands and seel of office, this  | (Seal)  President of Board  (Seal)                 |

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| 181   | Special Instructions to Chancery Clerk:  No application will be entertained unless made on the proper form and every blank in the form properly filled out. | FORM NO. 4                   | No. of Application | 168          | The               | PENSION     |
| 168   | ons to Chan<br>will be ent<br>em and eve  |                              | plication          | Postoffice . | Home of Adolicant | 1           |
| 8 3   | cery Clerk:<br>tertained un   | SOLDIERS and SAILORS PRORATE |                    | 18           | aleh              | APPLICATION |
| 1/1/2 | less made<br>the form   | ILORS                        |                    | r.           | 13                | Ounty       |

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