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.)

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What is your name? Answer

In what county and state do you reside? Answer What is the name of your Post Office? Answer

Q.	Are you a bona fide citizen of the United States? Answer
Q.	Are you a bona fide citizen of the State of Mississippi? Answor
Q.	Are you an inmate of the Beauvoir Soldiers' Home? Answer
Q.	What was the date of your enlistment? Answer July 18 19 64
Q.	In what state, county and place did you reside when you enlisted? Answer De Sato Co. Miss.
Q.	Answer Captain W to Raines and Answer Captain W to Raines and Captain W to Raines and Captain Were you ever discharged from your command? Answer Captain parallal
Q.	Were you ever discharged from your command? Answer O was parallo
Q.	If so, for what cause? Answer
Q.	Were you in active service at the surrender in 1865? Answer
Q.	If not, why? Answer
tna	"I do solemnly swear (or affirm) that I was a Confederate soldier or sailor (as the case may be); that I honorably discharged or paroled or did not desert from the Confederate service (as the case may be); I reside in this State; that statements set forth in application are true and correct I verily believe; so me God." (Signature of pensioner) & & & & & & & & & & & & & & & & & & &
	Sworn to and subscribed before me, this 14 day of august , 1922. Ob O Good Chancery Clerk 22 O
	Expires Jan. 9, 1923

(Signature of Officer My Commission (Signature of Officer My Commission)	(Signature of Witness)
TE-Must be attested by one or more creditable witnesses.	(Signature of Witness)
	E E Euson M (Signature of applicant)
Sworn to and subscribed before me, this 14 day of 0	Tugust 1022
.00	(Signature of officer) My Commission
The same of the sa	202 5 +
CHANCERY CLERK AND COUNTY BOARD OF INOUIL	COUNTY COUNTY
Allicaning MISS	192
We, the undersigned members of the Board of Inquiry, hereby appro-	re the foregoing application of
Clason of for pension becau	se we believe the facts stated in the app
on are true and the party should receive a pension.	20h 2
Given under our hands and seal of office, thisday of	, 192 Aug
· · · · · · · · · · · · · · · · · · ·	Dranson (Seal)
	President of Board.
	W D Lee (Seal)
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	Charleery Clerk.

PENSION APPLICATION

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See Sand Sallors

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Special Instructions to Chancery Clerk:

No application will be entertained unless made on the properly filled out.

The Manuel Sallors

PRORATE

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