## Application for Pension

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

Form No. 4 SOLDIERS and SAILORS

## PROPATE

-	Laws of March 13, 1922, H. B. 382.
	plications must be filed in duplicate with the Chancery Clerk on or before the first Monday in September the year in which application is first filed.
	(Applicant must answer all of the following questions.)
Q.	What is your name? Answer & D. Caldens + m.
	In what county and state do you reside? Answer Desoto Mississifife
Q.	What is the name of your Post Office? Answer Wall Muse
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 41
Q.	Are you an inmate of the Beauvoir Soldiers' Home? Answer One.
Q.	What was the date of your enlistment? Answer Securior of 1862
Q.	In what state, county and place did you reside when you enlisted?
	Answer alabama Tuscalor les Tuscalos
Q.	Give the names of the officers of your company, regiment or vessel?
	Answer Capt B.S. Eddies, Col Stausel
Q.	Were you ever discharged from your command? Answer Mo,
Q.	If so, for what cause? Answer
Q.	Were you in active service at the surrender in 1865? Answer
Q.	If not, why? Auswer
	"I do solemnly swear (or affirm) that I was a Confederate soldier or sailor (as the case may be); that I

was honorably discharged or parcied or did not desert from the Confederate service (as the case may be); that I reside in this State; that statements set forth in application are true-and correct I verily believe; so help me God."

	(Signature of per	sioner)	12 toddynu
Sworn to and subscribed befo	re me, this // day	of Sept	
	2	A Migou	Chancery Clerk
	08	miticeoft	he trace

se identical person named in the said application.	a. D. Haton
rn tand subscribed before me this // day	of Fogener
sept mee 1922	(Signature of Witness)
Osmey Do	p 60, delby
(Signature of Officer)	(Signature of Witness)
E-Must be attested by one or more creditable with	pesses- (Signature of Witness)
	00811
-	4 (Signature of applicant)
170	1 Sept 1002
Sworn to and subscribed before me, this	Talmey 100
	(Signature of officer)
0	· Salate
ICE OF CHANCERY CLERK AND COUNTY BO.	ARD OF INCUIRY COUNTY
Merriano "	1188. Jept //- 192
000	
We the upder great members of the Board of Inqui	ry, hereby approve the foregoing application of
	for pension because we believe the facts stated in the appli-
are true and the party should receive a pension.	1 144 30
	in at 1870 199
Given under our hands and seat of onice, this	- 33 01 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
Given under our hands and seal of onice, this	1 1
Given under our hands and sear or outce, this	1 D. Harrison (Seal)
Given under our hands and seat or onice, this	President of Board.
Given under our hands and seat of series, time.	President of Board.
Gives under our hands and seal of emres, time.	President of Board.
Given under our sands and seal of ourse, time	President of Board.
Given under our sands and seal of serios, time.	President of Board. (Seal)
Gives under our sands and seal of states, com.	President of Board. (Seal)
Gives under for saids and seal of states, com.	President of Board. (Seal)
Given under our hands and seal of states, com.	President of Board. (Seal)
Gives under for sands and seal of states, com.	Presidence of Beard.  (Seal)  (Seal)  (Seal)  (Seal)  (Seal)
Given under our hands and seal of effice, this	President of Board. (Seal)
Gives under for sands and seal of states, com.	Presidence of Beard.  (Seal)  (Seal)  (Seal)  (Seal)  (Seal)
Given under our mande and seal of states, com.	Presidence of Beard.  (Seal)  (Seal)  (Seal)  (Seal)  (Seal)
Gives under our sands and seal of states, com.	Presidence of Beard.  (Seal)  (Seal)  (Seal)  (Seal)  (Seal)

11 Steph 2.	Special Instructions to Chancery Clerk:  No application will be entertained unless made on the application and every blank in the form properly filled out.	PORM NO. 4—SOLDIERS and SAILORS PRORATE	No. of Application.	2 Calla Diceso	Nami of Applicant	De So to County	PENSION APPLICATION