

The Applicant must make Answer to all of the following Questions, and have it Written out Plainly in Ink:

- What is your name? Answer *R E Hudson*
How long have you resided in Mississippi? Answer *Forty Five years*
In what county do you reside? Answer *Tate*
What is the name of your postoffice? Answer *Independence Miss*
What was your husband's name? Answer *James R Hudson*
In what State did he reside when he enlisted in the service of the Confederate States? Answer *Miss*
What was the date of his enlistment? Answer *1861*
What was the name of the company and regiment or vessel in which he enlisted? Answer *Co. A. 9 Miss Reg*
How long was he in actual service of the Confederacy? Answer *Four years*
What were the names of the officers of the company, or regiment or vessel during the time he was in the service? Answer *Tom Wallace capt Basil R Rayburn Lieutenants*
Did he die in service, or did he serve till close of the war? Answer *Close of the war*
Was he honorably discharged? Answer *Yes* Q When was he discharged? Answer *May 1865*
Where was he discharged? Answer *High Point N.C.* Q Did he serve until the surrender? Answer *he did*
Where did he die? Answer *at home near Independence* When did he die? Answer *9th May 1885*
What is your age? Answer *Forty five (45)* Q Have you married since your husband's death? Answer *I have not*
Do you apply for a pension because you are indigent and unable to earn a livelihood? Answer *I do*
Do you hold any State, United States, County or City office, or have you employment from which you are receiving, as salary or fees, the sum of three hundred dollars per annum? Answer *no*
Are you worth in your own right, or in the right of another, property at its assessed value for taxation to the amount of five hundred dollars? Answer *I am not*

Sworn to and Subscribed before me, this *22* day of *Aug* 189*3*
H W McKeunon Jr
(Signature of Officer.)

R E Hudson
(Signature of Applicant.)

AFFIDAVIT OF TWO WITNESSES.

We, the undersigned, verily believe 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 *22* day of *Aug* A. D. 189*3*
H W McKeunon Jr
(Signature of Officer.)

H B Hunt
(Signature of Witness.)
W R Jones
(Signature of Witness.)

Office of Chancery Clerk and County Board of Inquiry, Tate County,
Quatobia Miss. Sept 5 1893

We, the undersigned members of the Board of Supervisors, Sheriff and Chancery Clerk, hereby approve the foregoing application of *R E Hudson* for pension because we know the applicant to be indigent and unable to earn a livelihood, 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 *5* day of *September* 189*3*

W B Crawford Seal
Pres't of Board.
P R Crockett Seal
S W Long Seal
W M Moun Seal
P M B Wait Seal
Sam House Seal
Chancery Clerk.

ATTEST
Sam House
(Attach Seal of Office.)
Chancery Clerk.

Filed the *22* day of *Aug* 189*3* Recorded *Sept 14* 189*3*
Sam House CHANCERY CLERK. By *S* D. C.