Application for Pension

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

Form No. 4-SOLDIERS and SAILORS
PROPAGE

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.

ą.	What is your name? Answer M. W. Mosby. Sr
2.	In what county and state do you reside? Answer De Soto County, mise
2.	What is the name of your Post Office? Answer Love Sta. must
2.	Are you a bona fide citizen of the United States? Answer
2.	Are you a bona fide citizen of the State of Mississippi? Answer
2	Are you an inmate of the Beauvoir Soldiers' Home? Anger 10.
1.	What was the date of your enlistment? Answer Spring of 1862
	In what state, county and place did you reside when you enlisted? Answer Muss. De So to County, at Cocksum mis
	Give the names of the officers of your company, regiment or regard? Answer Loth Bright Morgan Lieut Maxwell Co. 29 - Frank Reg.
	Were you ever discharged from your command: Answer
	If so, for what cause? Answer Nound
	Were you in active service at the surrender in 1865? Answer
	If not, why? Answer

"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 paroled 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."

· (S	ignature of pensioner) ///////	HAOL
Sworn to and subscribed before me, thi	21 dayof aug-	192 3
	R.C. Clifton	Chancery Clerk

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If the Board approves this application, the Chancery Clerk will so certify, at	
purpose, and forward all of the approved applications in a body to the Auditor	fter recording the same in a book !

Special Instructions to Chancery Clerk: We application will be entertained uritem made on the proper down and every blank in the form properly filled out.

PORM NO. 4-SOLDIERS and SAILORS

PRORATE

No. of Application.....

PENSION APPLICATION