

APPLICATION FOR PENSION

FORM NO. 1 - SERVANT

For \$40.00 per Year

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

Application of Indigent Servant of a Soldier or Sailor of the Late Confederacy, under H. R. 11, 1925

Application 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. 1. What is your name? Answer John Tate
- Q. 2. In what county and state do you reside? Answer DeSoto County, Mississippi
- Q. 3. Are you a bona fide resident of the United States and of the State of Mississippi?
Answer Yes.
- Q. 4. How long have you resided in Mississippi? Answer Eighteen (18) years
- Q. 5. In what state did you reside when you served as a servant of a soldier or sailor in the service of the Confederate States? Answer Mississippi
- Q. 6. What was the nature of your service in the Confederate Army or Navy? Answer Servant
- Q. 7. When did you begin your service in that capacity? Answer Soon after the war began.
- Q. 8. When did your service end in that capacity? Answer 1865
- Q. 9. Did you ever desert such service? Answer No. (Yes or No)
- Q. 10. Where were you at the surrender? Answer Como, Mississippi
- Q. 11. If not in service, why? Answer Not in service at that time.
- Q. 12. What was the name of the soldier or sailor under whom you served?
Answer Dr. George Tate
- Q. 13. In what state, county and place did he reside when he enlisted? Answer Como, Mississippi
- Q. 14. When did he enlist? Answer The beginning of active service.
- Q. 15. Give the names of the officers of his company, regiment or vessel?
Answer _____
- Q. 16. Was he ever discharged from his command? Answer No. (Yes or No)
- Q. 17. If so, why? Answer _____
- Q. 18. Was he in active service at the surrender in 1865? Answer Yes. (Yes or No)
- Q. 19. Do you apply for a pension because you are disabled and unable to earn a support by your own efforts? Answer Yes. (Yes or No)
- Q. 20. Give nature of your disability and destitution? Answer Old Age

John Tate
(Signature of Applicant)

Sworn to and subscribed before me, this 28th day of July, 1922

J. H. [Signature]
(Signature of Officer)

*allowed by Board
Gerald Chaddow, et al*

"I do solemnly swear (or affirm) that I was a servant of a Confederate Soldier or Sailor (as the case may be) that I did not desert the Confederate service, that I was honorably discharged or paroled (as the case may be), that I reside in this state, that statement set forth in application are true and correct. I so believe, as help me God."

(Signature of Pensioner) *John L. Tate*
 Sworn to and subscribed before me, this *28th* day of *July*, 192*2*
J. F. Conner Chancery Clerk.

AFFIDAVIT

We, the undersigned, certify that the facts stated in the above application are true and the applicant is the identical person in the said application.

Sworn to and subscribed before me, this *13* day of *Aug*, 192*2*
J. H. Pulliam (Signature of Witness)
T. G. Gobran (Signature of Witness)
Chas. Court (Signature of Officer)

BOARD OF CHANCERY CLERK AND COUNTY BOARD OF INQUIRY *W. Sparks* COUNTY

MISS. *Sept 5th* 192*2*

We, the undersigned members of the Board of Inquiry, hereby approve the foregoing application of *John L. Tate* for pension because we believe the facts stated in the application are true and the party should receive a pension.

Given under our hands and seal of office, this *5th* day of *Sept*, 192*2*

J. H. Pulliam (Seal) President of Board.
Rerald Chatham (Seal) Attorney.
M. L. Counts (Seal) Veteran of World War.
J. N. Vinson (Seal)
J. H. Stungley (Seal)
J. F. Conner (Seal)
J. F. Conner (Seal) Chancery Clerk.

TEST: (Attach Seal of Office) Chancery Clerk.

N. B.—If the Board approves this application, the Chancery Clerk will so certify, after recording the same in a book kept for that purpose, and forward all of the approved applications in a body to the Auditor's office by the first day of October. No application forwarded after that time can be received.

PENSION APPLICATION

No. of Application: _____

FORM No. 5—SERVANT

Special Instructions to Chancery Clerk:
 No application will be returned unless made on the proper form and every blank in the form properly filled out.

Name of Applicant: *John L. Tate*

Postoffice: *Wadeville, Miss.*

County: _____