

# APPLICATION FOR PENSION

FORM NO. 5—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. B. 11, 1928

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 Alex. Titus
- Q. 2. In what county and state do you reside? Answer DeSoto County, Miss.
- 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 89 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 Panola County, 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 1861
- Q. 8. When did your service end in that capacity? Answer 1862
- Q. 9. Did you ever desert such service? Answer No. (Yes or No)
- Q. 10. Where were you at the surrender? Answer at home, crippled during war
- Q. 11. If not in service, why? Answer Crippled
- Q. 12. What was the name of the soldier or sailor under whom you served?  
Answer Frank Fitzgerald
- Q. 13. In what state, county and place did he reside when he enlisted? Answer Panola Co., Miss.
- Q. 14. When did he enlist? Answer 1861
- Q. 15. Give the names of the officers of his company, regiment or vessel?  
Answer Capt. Jace Floyd
- 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 no, killed in service at Meridian, Miss. (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 Paralyzed and crippled and no relatives able to support him

Alex Titus  
(Signature of Applicant)

Sworn to and subscribed before me, this 8th day of September, 1930

(Signature of Officer)

"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 verily believe; so help me God."

(Signature of Pensioner)

*Alex Titus*

Sworn to and subscribed before me, this 5th day of Sept 1930

*W. L. Browning*

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 8th

day of September 1930

*W. L. Browning*  
(Signature of Officer)

*J. M. Messinger*  
(Signature of Witness)

*J. P. James*  
(Signature of Witness)

OFFICE OF CHANCERY CLERK AND COUNTY BOARD OF INQUIRY DeSoto COUNTY  
Hernando MISS. September 8th 1930

We, the undersigned members of the Board of Inquiry, hereby approve the foregoing application of

Alex Titus 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 8th day of September 1930

- F. W. Ketchum* (Seal)  
President of Board.
- P. C. Bowdre* (Seal)  
Attorney.
- W. P. Courts* (Seal)  
Veteran of World War.
- M. Blalock* (Seal)
- J. P. Hankley* (Seal)
- J. P. Daniels* (Seal)
- J. M. Messinger* (Seal)
- W. L. Browning* (Seal)  
Chancery Clerk.

ATTEST  
*W. L. Browning*  
 (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**

DeSoto County

Name of Applicant

Alex Titus

Postoffice

Hernando, Miss. Route 1

No. of Application

FORM No. 5—SHIVANT

Special Instructions to Chancery Clerk

No application will be entertained unless made on the proper form and every blank in the form properly filled out.

*W. L. Browning*  
1930