## POWER OF ATTORNEY.

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GEORGIA
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The same will same
is the sound
hereby
Minith Minith

### POWER OF ATTORNEY.

STATE OF GEORGIA,

Pulasti County.

1. Chilip Positolust hereby authorize

What Wright of Martin

to receive and receipt for the pension allowed and request that he remit same to P. J. Missiff

Ordinary P. C., at Marshins Ville by Express or check

Witness my hand and seal this 2 and day of Mary 1895.

Executed in presence of

Philip Spitchest

Sym Essiff

Around P. C.

And Mary 1895.

# Ground GENT PENSION Ground Gr

## QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Fullake County.
Philips Printehett of said State and County, desiring
to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside? (give State, County and post office)
Philip Prisches Oorting 1, Pulasti 60. Sa
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?  Near Continue Pulachi Counts in My age is 85 years
3. When and where were you born? in Handcook Col Sal,
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Georgia Millitar
5. When and where did you enlist? at do gstout Pulasti County
6. In what company and regiment did you enlist? Campany of Regiment 77 3 m
7. How long did you remain in that company and regiment? Eleven months
8. If you were discharged from same and joined another, or if you were transferred to another, give an
account of such discharge or transfer? Millihar left mover of friend 7 Ba as aflication
· · · · · · · · · · · · · · · · · · ·
9. For how long a period did you discharge regular military duty? Eleven Months
10. When, where and under what circumstances were you discharged from service?
By In Closing of the Confederate War
11. What is your present occupation? I am an Invalid
12. How much can you earn per annum by your own exertions or labor? Nothing
13. What has been your occupation since 1865? Joning to Farm
14. What sum would be necessary for your support for this pension year, and how much are you able to
contribute thereto either in labor or income? The \$ 60 00 \$ line Scan with it 2t North
15. What is your present physical condition and how long have you been in such condition?
My paramet physican condition is old age of Poverty Sickly weath to
fred mable to be up not more than 3 or 4 leaves the day a
16. Upon which of the following grounds do you base your application for pension, viz.: first, age and
poverty," second "infirmity and poverty" or third "blindness and poverty"?
17. If upon the first ground, state how long you have been in such condition that you could not earn
your support? If upon the second, give a full and complete history of the infirmity and its extent? If
upon the third state whether you are totally blind and when and where you lost your sight?
12 has here about 8 years and old age + Poverty sickly
and Weak I hack and growth he he up now more thate I or 4
hours an any day hour never been able to help oper 3 days in 3 years 18. What property, effects or income do you possess? I was a factionally finish facts
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any,
did you make of same? I mener hook any & made no
disposition of the Same
a series and the series are the series and the series are the series and the series and the series are the seri
20. In what County did you reside during those years and what property did you then return for taxation?
21. How were you supported during the years 1893 and 1894? My my wife
22. How much did your support cost for each of those years, and what portion did you contribute thereto
by your own labor or income? it was the good will of my wife with he mesdetie
23. What was your employment during 1893 and 1894? What pay did you receive in each year?
I could do nothing and Received nothing only as
the Kind hand of my wife  24. Are you married and have you a family! If so, is your wife living and how many children have you?
Give any and ear of abildren and their manns of support ? [ ] and married of have a fame
my wife is living one boy, minor, James, willy Pri Tohust - 16 years old, by the six of my wife he is supported
old by The six of my wife he is supported

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?
Sworn to and subscribed before me this the
1 And the of the state of
day of May 1895. Mark Applicant.
PGM Chaff Ordinary
of Pulaist County.
OHESTIONS FOR WITNESS
QUESTIONS FOR WITNESS.
STATE OF GEORGIA,
Pulacki County.
George, W, Stafsleton of of said State and County, having been presented
as a witness in support of the application of Philip Priteful for pension
under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the
following questions, deposes and answers as follows:  1. What is your name and where do you reside? Sur 750, W. Stafelitm, Man
(in 1 Pulasti stonet
2. Are you acquainted with Philips Partehet , the applicant, if so 1954
how long have you known him? I have known applicant sine
3. Where does he reside, and how long has he been a resident of this State? I have Known
Thelie I'm chels Some 1857 And tweet in Publish Co ever Since
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you
know this? I was in the same Lervis with him
and we send in The seases Milleting
5. When, where and in what company and regiment did he culist? he firs went to the last of you Brawn Company F. ? Ryin.
6. Were you a member of the same company and regiment?
7. How long did he perform regular military duty, and what do you know of his service as a Confed-
erate soldier, and the time and circumstances of his discharge from the service? he service
Elever mouth I was with him is her service Discharged of the
war Clasing in may 1865.
8. What property, effects or income has the applicant? (Give your means of knowledge.)
None And no income I live about 2 miles from him Line 1871
of Know he is in The hands of Poventy
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition,
if any, did he make of same? None, and No Income, had from to
dispose of
10. What is the applicant's occupation and physical condition? he has no compation
11. Is the applicant unable to support himself by labor of any sort, if so, why? he is to old in the to do any kind of work or loter.
Age to do and to xeeble to do any kind of work or loter.
7/ 1/4
12. How was he supported during the years 1893 and 1894? By The Kind hand of
- in water
13. What portion of his support for these two years was derived from his own labor or income?
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension
under the Act of December 15th, 1894? old age and Informating and
both with Pourty The Fines and als decord
Requisites and partly the Third but not Totally Blind
15. What interest have you in the recovery of a pension by this applicant?
Sworn to and subscribed before me, this
Sworn to and subscribed before me, this the L day of Many 1895.   Applicant.
Amebieto sele.
alles the

AFFIDAVIT	OF PHYSICIANS.
STATE OF GEORGIA,	ntv }
Personally came before me v. X	
It. B. Cosswell	, both known to me as reputable physicians
	y on oath that they have examined carefully
Divisi Dia	, applicant for pension under the Act of 1894, and after
Smile decoy Tree	lower insufficiency of the
	*
any work or calling sufficient to earn a suppo	rysical condition of applicant renders him unable to labor at ort for himself, and that we have no interest in said pension
being allowed.  Sworn to and subscribed before me, this	of Stayer In. D.
the 2 day of many	1895. M. B. learswell mo
STATE OF GEORGIA,	
1, STM Eniff the applicant Philip On	, Ordinary in and for said County, hereby certify that
the applicant Thelip One	tekett resides in said County, and was a boun
of the resident of this State on the first day of J	January, 1894, and that the witnesses, viz. & W. Stoplet
are of trustworthy character and that their sta I further certify that before answering	atements are entitled to full faith and credit. the foregoing questions, the applicant and each witness took
the oath hereon prescribed, and that the full to before same were signed.	text of the affidavits was read to the applicant and witnesses
I further certify that the tax digests of.	Pulaska County show that applicant
returned for taxation in his name in 1893,	
of property, and in 1894, do agent f	dollars of property.
Witness my hand and seal of office, this	
	Por Pulaske Ordinary
	of County.

NOTE.

Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."

Pri	tehett, Pa laski	pillip:
Pu	laski (	ountry
	1897	
APP	Sharigan LICATION FOR	PENSION
ı	DUE DECEASED S	OLDIER
	UNDER ACT	
	——ВҮ——	
Mrs. A	anery Parteh	ett .
	of Phillip	
County	Pulask	
Approv	ed and Paid	
	3/3	100 ~
		1897
	Richard Jo	
(	Com of Pura	c. Escoutive Department.
	Geo. W. Harrison, State Printer,	
	W.A.W.	cht

1.

## APPLICATIONS FOR PENSIONS DUE DECEASED SOLDIERS.

Under Act Approved October 9, 1891. Dec 191896.
STATE OF GEORGIA.

STATE OF GEORGIA,		
COUNTY OF Pulaski	2 * 1 2	
Personally appears before me Mrs.	Pritehett	
of said County of Pulaski	State of Georgia, who, being d	duly
sworn, says on path that she is the widow of Phile	ip Pritchett	_
who was district Confederate soldier, and whose name h	ad been duly enrolled as entitled to a pen-	sion
of Sint doces - for 14 96 as a maide		from
the State of Georgia. That said Phillip		
1	recember 1895	, in
Juluski County and	d that at his death, his right to said pension	for
the year anding October 26, 189 had accrued, but had n	ot been paid to him for the said pension y	ear.
Applicant, as his widow, applies for the amount which wou she further she is no	on in distitute circumst.	ime.
Sporn to and subscribed before me, this has	neix & Pritehett	
Amegriff Ordinary.		
If allowed, I authorize WA Wne	ght of Atlanta	9
to receive and receipt for the amount.		
Attest:	hus hancy & Prite	hit
Fim Griff Orchery 16	minst	
Note.—Above form may be used by the guardian or next of kin for dies and leaves no widow, by altering the same to suit the facts.	any dependent minor children of the deceased soldier	who
		_
STATE OF GEORGIA,		
Julaski COUNTY.		
i, Simesiff	Ordinary of said County, do cer	rtify
that I am personally acquainted with Mrs.	relebett	
that I know personally, or from saora, testimony of wi	itnesses before me, that she is the widow	v of
Phillip. Pretentt, a dece	ased Confederate soldier, who has been allo	wed
	nd that at the date of his death his right t	to a
pension had accrued but had not been paid for the current	pension year.	
Given under my official signature and seal, this	2000 da	y of
march 1897		1
, and	The Guff	
SEAL.	Ordinary	•