PENSIONERS now on the ROLL are NOT required to make new applications, but must file annual certificate.

THIS APPLICATION

Must be Filed with the Clerk of the Corporation or Circuit Court of your City or County.

(No application will be entertained not on the printed form.)

FORM No. 2.

APPLICATION of Disabled Soldier, Sailor or Marine of the late Confederacy Under Act of April 2, 1902, as amended.

I, E S Barrett, do hereby apply for a pension under the provisions of the act of the General Assembly of Virginia, approved April 2' 1902, as amended, entitled "An act to aid the citizens of Virginia who were disabled by wounds received during the war between the States while serving as soldiers, sailors, or marines of Virginia, and such as served during the said war as soldiers, sailors, or marines of Virginia, who are now disabled by disease contracted during the war, or by the infirmities of age * * * and providing penalties for violating the provisions of this act." I do solemnly swear that I am a citizen of the State of Virginia, and that I have been an actual resident of the said State for two years, and of the city or county of my present residence for one year next preceding the date of this application, and that I was a soldier (sailor or marine) of the Confederate States in the war between the States; and that I am now disabled, and that from the effects of such disability I am incapacitated from following my usual and ordinary occupation, or any other occupation for a livelihood; and that during the said war I was loyal and true to my duty, and never, at any time deserted my command or voluntarily abandoned my post of duty in the said service, and that by reason of such service and disability I am now entitled to receive a pension under the provisions of said act. And I do further swear that I do not hold any national, State, city or county office or position which pays me in salary or fees TWO HUNDRED ($200.00) dollars per annum; nor have I an income from any other employment or any source whatever which amounts to TWO HUNDRED ($200.00) dollars per annum; nor do I receive from any source whatever money or other means of support amounting in value to the sum of TWO HUNDRED ($200.00) dollars per annum; nor do I own in my own right, nor does any one hold in trust for my benefit or use, nor does my wife own, nor does any one hold in trust for my wife, estate or property, either real, personal, or mixed, either in fee or for life, of the assessed value of SEVEN HUNDRED AND FIFTY ($750.00) dollars: provided, however, that a soldier, sailor or marine who is totally blind, or who lost a hand or a foot while in the discharge of his duty during the war shall be entitled to a pension, unless he or his wife has an estate of the assessed value of ONE THOUSAND ($1000.00) dollars, but also that a soldier, sailor or marine who has reached the age of eighty years shall be entitled to a pension, unless he or his wife shall have an estate of the assessed value of FIFTEEN HUNDRED ($1,500.00) dollars, nor do I receive any aid or pension from any other State, or from the United States, or from any other source, and that I am not an inmate of any soldiers' home and am without means of support, either direct or indirect, and I do further swear that the answers given to the following questions are true:

☞ All questions must be answered fully—be explicit:

1. What is your name? E S Barrett
2. What is your age? Sixty six years.
3. Where were you born? Sussex County Va
4. How long have you resided in Virginia? all of my life
5. How long have you resided in the City or County of your present residence? 2 years.
6. In what branch of the service were you? Infantry 44th Battalion Regiment. Company D Company
7. Who were your immediate superior officers? Colonel P. V. Batte Major Captain Wm E Hinton
8. When did you enter the service? November 1863
9. Where did you enter the service? Petersburg Va
10. When and Why did you leave the service? Surrendered at Appomattox Court house april 9 1865.
11. Where do you reside? If in a city, give street address. Post-office Wakefield Va R.F.D. no 1 County of reside in Southampton Co, Virginia
12. Have you ever applied for a pension in Virginia before? If so, why are you not drawing one at this time? No.
13. What is your usual and ordinary occupation for earning a livelihood? farming
14. Are you following such occupation or any other occupation or employment at this time? If yes, state the nature and extent of same. I am living with my son, and working on farm when able.
15. What is your annual income? $ nothing more than board
    NOTE—By income is meant the total gross receipts derived by you from all crops (whether sold or used) wages and other sources valued in dollars.
16. How much property do you own? Real Estate $ none Personal Property $166
17. What is the exact nature of your disability and the cause thereof? age, with pains in hips & legs, caused by work,
18. Are you totally or partially incapacitated by such disability? partially
19. Give the names and addresses of two comrades who served in the same command with you during the war.
    Name Murdock Bradshaw Address Ivor Va R.F.D. 1
    Name R. W. Pulley Address Ivor Va R.F.D. 1
    See Certificate "B".
20. Is there a camp of Confederate Veterans in your city or county? yes
21. Give here any other information you may possess relating to your service or disability which will support the justice of your claim.

☞ A signature made by X mark is not valid unless attested by a witness. ☜

WITNESS ....

E S Barrett
(Signature of Applicant.)

I, H. P. Pulley a Justice of the Peace, in and for the County of Southampton, in the State of Virginia, do certify that the applicant whose name is signed to the foregoing application, personally appeared before me in my County aforesaid, having the aforesaid application read to him and fully explained, as well as the statements and answers therein made, the said applicant made oath before me that the said statements and answers are true.

Given under my hand this 12th day of May 1913.

H. P. Pulley J.P.
Signature of Officer.