The Applicant must read, or have read to her, every word in this Application

PENSIONERS now on the ROLL are NOT required to make new application, but must file annual Certificate

THIS APPLICATION must be filed with the Clerk of the Corporation Court of Your City or Circuit **Court of Your County**

FORM No. 7

APPLICATION of a widow of a Soldier, Sellor, or Marine of the late Confederacy under acts approved March 26, 1928, and March 10, 1928, as amended by an act approved March 24, 1930.

Mrs. Annie L. Bryant do hereby apply for a pension under the provisions of the acts of the General Assembly of Virginia relating to Confederate pensions. 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 one year next preceding the date of this application, and that I am the widow of ALOGY U Do BLYCHU soldier (sellor or marine) in the service of the Confederate States in the War Between the States, and that I was married to him

national, State or county office, which pays a salary or fees exceed-ing one thousand dollars (\$1,000.00) per annum, nor have I income ing one thousand dollars (\$1,000.00) per annum, nor have I income from any and all sources whatever exceeding one thousand dollars (\$1,000.00) per annum, nor do I own in my own right, nor is there held in trust for my own benefit, estate or property, either real, personal or mixed in fee or for life, which yields a total income ex-ceeding one thousand dollars (\$1,000.00) per annum. I do further swear that I do not receive a pension from this or any other State. I do solemnly swear that the answers given to the questions which I am required to answer in this application are true to the best of my knowledge and bellef.

-1 1 12

Any essessment of property does not affect the right to pen-sion, but the gross income from all sources must not exceed \$1,000.00 per year. Certificates under B, C, E, not necessary if husband was per year.

NOTE.--Widows seventy-five years old or over can receive pension regardless of date of marriage. Widows under seventy-five years old are required to have been married prior to January 1st, 1890,

1 What is your name? Mrs. Annie L. Bryant	14. Who were his is a " to see " officers?
2. What is your age? 75 years	Colonel
3. Where were you born? Southaup to'n Gounty	Captain L. R. Kilby
	15. Give the names and addresses of two courages who served in the
4. How long have you resided in Virginia? PREOTIOE 11. 61	(Not necessary if your husband was a pensioner.)
5. How long have you resided in the City or County of your present residence? Practically all My 1116	Name
residence? Practically all my tite	Address None living
6. Where do you resider it in a city, give surer address.	Name
Post office Ilewsoms, Va.	· Address
County of South ampton Virginia	16. Name source of income, and what income have you from all
7. With whom do you render	\$25.00 or \$50.00 per year
Mr. N. Lee Story	
8. What was your husband's full name?	NOTE-By income is means the total gross resolute derived by you from all erops (whether sold or used), weges and all other sources valued
Albert Davis Bryant 9. When, where and by whom were you married?	
When? 1898	17. Was your husband on the pension roll of Virginia? If yes, in. what county or city was his pension allowed?
	No
Where? Hertford County, North Carolina	18. Have you ever applied for a pension in Virginia before? If yes,
By whom? Rev. N. B. Foushee	why are you not drawing one at this time?
10. When and where did your husband die?	Applied for one, but did not receiv
South ampton County, 1978	seme on account of date of marriage
Phralysis	19. Is there a camp of Confederate Veterans in your city or county? One in County
12. Have you married since the death of your husband? If yes, give	20. Give here any other information you may possess relating to the
full particulars.	service of your husband which will support the justice of your
. <u>No</u>	ciaim.
13. In what branch of the army did your husband serve?	
00. R. 16th Ve. Regt. Regiment.	
E	
A signature made by X mark is not valid unless attested by a	Come annie X L. Bryant
WITNESS Mu. h. fee story	Signature of Applicant.
(Make Katitchin. Itala	milinblig in and for the standing of
	at the applicant whose name is signed to the foregoing application per-
The state of virginia, do carbiny the	and a provide the second of th
sonally appeared before mie in myle the add applicant made eath be	the aforestith upplication read to Perfond fully explained, as well as the fore me that the fid effetements and prevervars the.
(Given under our hand this of The day of the time 1	3.3 Makel A. Tit chen
Communication affencies Det. 22 1930	Signature of Officer.
Communican Appenes Der, PD 1700	