

(B)

AFFIDAVIT OF COMRADES.

We, *Largest, Wm. Rouse* and *W. D. Folk*, do solemnly swear that we are residents of the *County* of *Richmond*, in the State of *Virginia*, and that *Emeline Johnson* whose name is signed to the annexed application for aid under the act of the General Assembly of Virginia, approved April 2, 1902, is personally well known to us, and that we have known her for *40* years, and know her to be the widow of *Allen Johnson*, who was a soldier (sailor or marine) in the military (or naval) service of Virginia, or of the Confederate States, and that we were soldiers (sailors or marines) in the said service during the said war, and that we were, with the said *Allen Johnson*, members of (here state the command and the immediate superior officers thereof) *Company A 19th Virginia Battalion Heavy Artillery* and that to our personal knowledge, on or about the *1st* day of *186*, at (here state battle or combat where killed or fatal wounds received) *1st* and that the said *Allen Johnson* during the said war (state here whether killed or died as the result of wounds received, or surgical operation therefor) *1st* (If he died after the war, strike out all relating to death during the war and proceed as follows), on or about the *1st* day of *November* *1891*, the said *Allen Johnson* died, and that the said *Allen Johnson* was a true and loyal soldier in the said service, and was faithful in the discharge of his duty as a soldier (sailor or marine) in the said service, and that we have no personal interest in the allowance of the applicant's claim.

Subscribed and sworn to before me, *Notary Public*, for the *County* of *Richmond*, State of Virginia, this *1st* day of *October*, 19*02*.

NOTE.—If only one comrade is living whose residence and address is known to applicant, let him make the above affidavit. If no such comrade is living whose address is known to applicant, then let one or more reputable persons who have personal knowledge of the services of the applicant and of cause of his disability, make the following affidavit:

(C)

AFFIDAVIT OF WITNESSES, NOT COMRADES, AS TO WOUNDS.

We, *John Dole* and *John Dole*, of the *County* of *Richmond*, in the State of *Virginia*, do solemnly swear that we personally know, and are well acquainted with *Emeline Johnson* whose name is signed to the annexed application, and who is applying for aid under the act of the General Assembly of Virginia, approved April 2, 1902, and that we have known the said applicant for *40* years, and that to our personal knowledge she is the widow of *Allen Johnson*, who was a loyal and true soldier (sailor or marine) in the military (or naval) service of Virginia, or of the Confederate States, in the war between the States, and that on or about the *1st* day of *186*, at (here state battle or combat where killed or fatal wound received) *1st* the said *Allen Johnson* during the said war (state here whether killed or died as the result of wounds received, or surgical operation therefor) *1st* (If he died after the war, strike out all relating to death during the war and proceed as follows), on or about the *1st* day of *1891*, the said *Allen Johnson* died, and that the said *Allen Johnson* lived as husband and wife up to the date of the death of the said *Allen Johnson* and that we have no personal interest in the allowance of the applicant's claim.

Subscribed and sworn to before me, *Notary Public*, in and for the *County* of *Richmond*, this *1st* day of *October*, 19*02*.

NOTE.—If no comrade in arms or other person who has knowledge of the service of the applicant and of the cause of her disability is living, whose residence is known to applicant, state that fact here.

(D)

CERTIFICATE OF PHYSICIAN.

I, *John Dole*, a practicing physician in the *County* of *Richmond*, in the State of Virginia, do certify that I am personally acquainted with *Emeline Johnson*, whose name is signed to the annexed application for aid under the act of the General Assembly of Virginia, approved April 2, 1902, and that I attended her husband, the said *Allen Johnson*, during his last illness, and that from my professional knowledge of the cause of his death, I verily believe that his death resulted from *Bugle disease which caused dropsy* and that I have no personal interest in the allowance of the applicant's claim. Given under my hand, this *1st* day of *September*, 19*02*.

NOTE.—This certificate of physician shall only be required in cases where the husband has died since the close of the war.

(E)

CERTIFICATE OF CAMP OF CONFEDERATE VETERANS.

The *Commander* of the *County* of *Richmond*, in the State of Virginia, hereby certifies that it has examined into the merits of the annexed application of *Emeline Johnson* for aid under the act of the General Assembly of Virginia, approved April 2, 1902, and being satisfied of the justice of her claim, hereby recommends the said *Emeline Johnson* for aid under the provisions of the said act, and that it has no personal interest in the allowance of the applicant's claim.

NOTE.—If there is no camp of Confederate veterans in applicant's city or county, then the affidavit of two ex-Confederate soldiers residing in said city or county must be obtained, as follows:

(F)

CERTIFICATE OF EX-CONFEDERATE SOLDIERS.

We, *John Dole* and *John Dole*, of the *County* of *Richmond*, in the State of Virginia, do certify that we were soldiers (sailors or marines) of Virginia in the war between the States, and that we have examined into the merits of the annexed application of *Emeline Johnson* for aid under the act of the General Assembly of Virginia, approved April 2, 1902, and that we are satisfied of the justice of her claim, and recommend the said *Emeline Johnson* for aid under the provisions of the said act, and that we have no personal interest in the allowance of the applicant's claim. Given under our hands, this *1st* day of *September*, 19*02*.

(G)

CERTIFICATE OF THE COMMISSIONER OF THE REVENUE.

I, *John Dole*, Commissioner of the revenue, in the *County* of *Richmond*, in the State of Virginia, do certify that *Emeline Johnson* or her trustee, whose name is signed to the annexed application for aid under the act of the General Assembly of Virginia, approved April 2, 1902, is charged on the land and personal property books of the said *County* with estate, real, personal and mixed, of the assessed value of *\$100.00* dollars.

Given under my hand, this *1st* day of *September*, 19*02*.