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THIS APPLICAT

APPLICANT

SINCE

March 21, 1914, entitled, "An act to amend all acts and parts of acts in conflict herewith."

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 five years next preceding the date of this application, and

that I am the widow of \_\_\_\_\_ who was a soldier (infantry or marine) in the service of the Confederate States in the war between the States, and that, to the best of my knowledge during the said war my husband was loyal and true to his duty, and never at any time deserted his command or voluntarily abandoned his post of duty in the said service, and that I was never divorced from my said husband, and that I never voluntarily abandoned him during his life, but remained his true, faithful and lawful wife up to the date of his death, and that I am a widow at the date of making this application, and that 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 position or office, either national, State, city or county, which pays me in salary or fees Two hundred (\$200.00) dollars per annum; nor have I an income from any other employment or 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 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 estate or property, either real, personal, or mixed, in fee or for life, of the assessed value of One thousand (\$1,000.00) dollars; nor do I receive any pension from any other State, or from the United States, or from any other source, and that I am without necessary means of support, from any source; and I do further swear that the answers given to the following questions are true:

All questions must be answered fully. Widows married after May 1, 1868, are not entitled to pensions.

1. What is your name? Berta C. Pudley
2. What is your age? 68 years
3. Where were you born? Southampton Co. Va.
4. How long have you resided in Virginia? all my life
5. How long have you resided in the City or County of your present residence? 68 years
6. Where do you reside? If in a city, give street address.  
Postoffice Pike  
County of Southampton Virginia.
7. With whom do you reside?  
my daughter & her husband
8. What was your husband's full name?  
Ben H. Pudley
9. When, where and by whom were you married?  
When? 15 Nov 1866  
Where? Southampton Co.  
By whom? Robert Barnes
10. When and where did your husband die?  
June 1896. Southampton Co.
11. What was the cause of his death?  
Congestive heart disease
12. Give name and address of physician who attended your husband at the time of his death. (See Certificate "D.")  
Name Dr. J. J. Prillow  
Address Dead
13. Have you married since the death of your husband? If yes, give full particulars.  
no
14. In what branch of the army did your husband serve?  
Company E. 3 Va. Regiment Regiment.  
Company E Company.

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

WITNESS

I, J. L. Drake, 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 office aforesaid, having the aforesaid application read to her and fully explained, as well as the statements and answers herein made, the said applicant made oath before me that the said statements and answers are true.

Given under my hand this 14 day of June 1914

her, every word in this Application.  
new application, but must file annual certificate.

operation or Circuit Court of Your City or County.  
(not on the printed form.)

o. 5.

late Confederacy Under Act approved March 21, 1916.

for a pension under the provisions of the act of the General Assembly of Virginia, approved March 21, 1916, entitled an act to consolidate into one act all acts relating to Confederate pensions and to repeal

15. Who were his immediate superior officers?  
Colonel Barnes  
Captain Kink's
  16. Give the names and addresses of two comrades who served in the same command with your husband during the war. (See Certificate "B.")  
Name Jas. H. Gray  
Address Franklin, Va.  
Name Benj. Knight  
Address Southampton Va.
  17. Give the names and addresses of two persons who are familiar with the circumstances of your husband's service and death. (See Certificate "C.")  
Name W. C. Powell  
Address Capron Va.  
Name Benj. Knight  
Address Southampton Va.
  18. What assistance do you receive, and what income have you from all sources?  
none
- 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.
19. How much property do you own?  
Real Estate \$ None  
Personal Property \$ None
  20. Was your husband on the pension roll of Virginia? If yes, in what county or city was his pension allowed?  
no
  21. Have you ever applied for a pension in Virginia before? If yes, why are you not drawing one at this time?  
no
  22. Is there a camp of Confederate Veterans in your city or county? yes
  23. Give here any other information you may possess relating to the service of your husband or the cause of his death which will support the justice of your claim.

Berta C. Pudley  
Signature of Applicant.

J. L. Drake  
Signature of Officer.