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, Sailor, or Marine of the late Confederacy under act approved March 25, 1928, as amended by acts approved 1928, 1930, 1932 and 1934.

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 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 belief. Any assessment of property does not affect the right to pen-Any assessment of property does not affect the right to pen-sion, but the gross income from all sources must not enceed \$1,000.00 per year. Cartificates under B, C, E, not necessary if husband was pensioner. NOTEL.-Widows seventy-five years old or over can receive analon regardless of date of marriage. Widows under seventy-five save old are required to have been married prior to January 1st 1921. Mrs. Margaret R. Pulley 1. What is your name?... 15. Who were his immediate superior officers? 55 2. What is your age? . Colonei . Southampton County Where were you born?... Captain Give the name and address of a comrade who served in the same command with your husband during the war if living. (Not necessary if your husband was a pensioner.) 16 How long have you resided in Virginia? 53 years How long have you resided in the City or County of your present 58 years regidence? Where do you reside? If in a city, give street address, Franklin 6 L. L. Manry. Name _ Post office Courtland. Va. Address . 17. Name source of income, and what income have you from all Southampton 7. With whom do you reside? ... Virginia sources? No income. Board 8. What was your husband's full name? NOTE-By income is ment the total gross results derived by you from all crops (whether sold or used), wages and all other sources valued Richard William Pulley 9. When, where and by whom were you married? When? 1904. Mar. 10th. 18. Was your husband on the pension roll of Virginia? If yes, in what county or city was his pension allowed? Where? Southampton Co. Yes. Southampton Co. Rev. G. C. Smith 19. Have you over applied for a pension in Virginia before? if yes, why are you not drawing one at this time? By Whom? 10. When and where did your husband die? Did not come within time limit Yee. Mar. S. 1929, Southampton Co. Ivor. Ve 11. What was the cause of his death? till recent law was passed. 20. Is there a camp of Confederate Veterans in your city or county? Heart trouble. 12 Have you married since the death of your husband? If yes, give Uranhart-Gillette. full particulars, Give here any other information you may possess relating to the service of your husband which will support the justice of your 21. No. cisim, 13. Are you a Widow now? Yes. 14. In what branch of the army did your husband serve? 44th. Bn. Infantry Regiment. Company, A signature made by X mark is not valid unless attested by a wimeer. WITNESS . Signature of Ap I Franklin Edwards <u>Notary Public</u> . in and for theQQ.e. Southampton in the State of Virginia, do certify that the applicant whose name is signed to the foregoing application per-Given under our hand this 23 day of ADL Franklin words ., 19.34. Signature of Officer.