(E) CERTIFICATE OF CAMP OF CONFEDERATE VETKRANS. (G) CERTIFICATE OF COMMISSIONER OF REVENUE. (Mu-t be filled up when there is a camp in applicant's city or Commissioner of Revenue connty.) P authan in the then In the state of Virginia, do cartify that the applicant (his wife, trustee, or trus-tee for his wife), whose name is signed to the foregoing application for aid under the act of the General Assembly of Virginia, ap-proved March 10, 1920, amending an act approved February 28, 1918, is charged on the land and personal property books of said commander of Camp_of/Confederate Veterans of the .of deuthow Generates ..with estate, real, personal or Om L.m. nuch mized, of the asses in the State of Virginia, horeby certify that the said camp has exmed value of *\$. Q.Q. In the State of Virginia, hereby certify thay the said camp has ex-amined into the merits of the foregoing application for aid under the act of General Assembly of Virginia, approved March 10, 1920, amending an act approved February 28, 1918, and being satisfied of the justice of said claim, hereby recommend the same, under the provisions of the said act, and that the said camp has no personal interest in the allowance of the applicant's claim. mi-2 Given under my hand this , 192 3dev of • raun N. S.Gar 2 Comm issioner of Revenus. "The actual amount due or unpaid upon any deed of trust or mortgage to secure the payment of a debt shall be deducted from the assessed value of the property of claimants under this act. In com-benefit, all property conveyed by deed for consideration not deemed valuable in law or parted with by gift since April 3, 1911, shall be considered as his or her estate. Commander. Given under my hand this. horr. .day of ... , 19**2**42 NOTE .-- If there is no camp of Confederate Veterans in applicant's oity or county, the cortificate of two ex-Confederate soldiers, well-known and of good reputation, residing in said eity or county, mus-be obtained to cortificate F. (H) CERTIFICATE OF PENSION BOARD. Mauri , · · chairman of the Pension Board of the California of Saula and State of Virginia, do hereby capitry that the foregoing applies (F) CERTIFICATE OF EX-CONFEDERATE SOLDIERS. the, (Not necessary when cartificate E can be filled.) ation has been examined and approved by said Board. 2 ef y and In testimony whereof I hereto art my hand this 2: day of , 193.3 nove: イ・ヘー 1:1 \sim Chairman of Pennon Board State of Virginia, do cartify that we were soldiers (sailors or ma-rines), of the Confederate States in the war between the States, and that we have examined into the merits of the foregoing appli-cation for aid under the act of the General Assembly of Virginia, approved March 10, 1920, amending an act annound Balance (I) CERTIFICATE OF JUDGE (1) CERTIFICATE OF JUDGE This Court, from an examination of the foregoing application and of the affidavits, certificates, etc., therewith filed, and hereto annared, and of such witnesses as were required and celled by the event, heing antiafied that the said application is supported by the affidavits, certificates, etc., of persons of well-known reputation for truth, honesty and integrity, and that the claim of the said ap-plicant is just, and in due form, doth certify the same to the Auditor of Public Accounts. and do solemnly swear that we are residents of the...... ()) CERTIFICATE OF PHYSICIAN. Physician will please read carefully the answers to questions 17 and 18, and the following cartificate before filling out. 1918, is personally well known to us, and that we have known him 1.4 Unine practicing physician in the marines) in the military (or naval) service of Virginia, or of the Confederate States, during the war between the United States and the Confederate States, and that the said applicant, who was also a soldier (sailor or marine) in the said service during the said war, was, with us, members of the same command and that the said aplon own A suff of the state of the opinion that he is disabled by reason of (physician will here state SPECIFICALLY the nature of the disability and the cause thereof, and if such disability be total, whether the applicant is de-Soulam plicant was a true and loyal soldier (sailor or marine) in the sor-vice, and was faithful in the discharge of his duty, and that we verify believe he is disabled from the causes and in the manner in his application stated and that his claim is just and that we have no personal interest in the allowance of his claim under the prived thereby of all ability to pursue his usual and ordinary occupation, or any other occupation for a livelihood, and if the disability be partial, to what extent the applicant is hindered thereby said act from pursuing such occupation as aforesaid. If the physician con-A signature made by X mark is not valid unloss attested by a siders the disability total, he will, in addition to the cause disclosed witness. examination, repeat the language underscored above). by the aid Mr MOR Acauro Comrades. ind white WITNESS. <u>5m</u> Subscribed and sworn to before me. a. mette бU **.** kons and that I have no personal interest in the allowance of the appliin and for the. cant's claim. .., 19. 1924 Given under my hand this 31 day of. State of Virginia, this......day of let luty k: M. D. Signature of Officer.
