## Pension Form No. 3. **Application of Widow.**

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and an and an anti-anti-anti-anti-anti-anti-anti-anti-
during the war between the States while serving as soldiers, sallors, or marines of Virginia, and such as served during the said war as soldiers, sallors, or marines
or virginia, who are now disabled by disease contracted during the war, or by the infirmities of any, and the wildows of soldiers, sollors, or marines of Virginia who
lost their lives in said service, or whose ideath resulted from wounds received or discase contracted in said service, and providing penalties for violating the pro-
visions of this act, and I do solomnly swear that I am a citizen of the State of Virginia, melalent at MI acta Manager 195
County of
for one year sext preceding the date of this sppliestion, and that I am the widow of . Low how a spile the second se
(sallor or marine) in the service of the fisto of Virginia in the war between the fitates, and who was a member of (here state specifically the command and hranch
of the service to which the husband of the applicant belonged, and, if possible, the names of his immediate superior officers) . Caplaine .
Co. a. 41th angiment. of virginia a aluntano.
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and who, while in the discharge of his duty in the military or naval service of the State of Virginia, or of the Confederate States, during the mid war, lost his life (if the husband of such widow was killed or died during the man as the manual and have been been been been been been been be
(if the husband of such widow was killed or died during the war as the result of wounds received, state the fasts of the case as near as possible, giving the date of the husband's death)
(if the husband died after the war, strike out all relating to his death during the war, and then proseed as follows :), and who has since the said war died (here state specifically the cause of the death of the husband of the applicant and the data the data the said of the specifically in the said war died (here
state specifically the cause of the death of the husband of the applicant and the date thereof). This and a the main and the date thereof). This and the date thereof. It have allow for the brain ferrer . class of interest a the first of 7.3
from the country and the set of t
and that in the base of me becombine dense the out of the test of test
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 volun- tairly abandoned his post of duty in the said service, and that I was never directed from any relatively and post of duty in the said service.
tairly abandoned his post of duty in the said service, and that I was never divorced from my said husband, and that I never voluntarily adandoned him during his life, but remained his true, faithful, and lawful wife up to the date of his death, and that I am a middre of mobile this employed from my said that I am a middre of mobile this employed from the second se
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, under the said act the sum of Twenty-Five dollars appually and the further summer that I do not hold our pacific or solution.
now entitled to receive, under the said act the sum of Twenty-Five dollars annually. And I do further swear that I do not hold any position or office, either national, State, city or county, which pays me in mlary or free Two Hundword dollars per annum a nor here i an income from our other owned.
either national, State, city or county, which pays me in mlary or fees Two Hundred dollars per annum; nor have I an income from any other employ- ment or other source whatever which amounts to Two Hundred dollars per annum; nor do I receive from any source whatever money or other means of
support amounting in value to the sum of Two Humdired dollars per annum; nor do I escrive from any source whatever money or other means of
use estate or property, either real, personal, or mixed, either in fee or for life, of the assessed value of Neven Mundred and Fifty dollars; nor do I re-
eelve any aid or pension from any other State, or from the United States, or from any other source, and that I am without means of support, direct or indirect;
and i do mitther swear that the answers given to the following questions are true:
L What is your sent Ann TT T who are the
4. How long have you resided in the city or county of your present residence. Any
a. What is your hushand's full name? Ans
( When and where you manded and by shows the
" " Made where, as now any you can state, did your hushand die and from what cancer in a los of the base of the ba
8. Have you been married since the death of your said husband? Ans . Ma
8. Have you been married since the death of your seld husband? Ans . Ms
10. What property-real, personal or mixed do you own? Ann Arriver Gight in 241. a sole of land. and sole of 15. work for first find 11 What assistance do you receive, and what income have you from any source? Ans . Mone. It suft the ment of about 12 arms of dans
11 What assistance do you receive, and what income have you from any source? Ans . Moran. Lit cat the mant of a four 12 games and the the
. Which it my chouses.
The state of the s
At the man we had a correctly of two persons who are familiar with the elements are a human the dark the dark the second when the dark the second sec
A CONTRACTOR AND A CONT
ice. If your hundraid dired ance the war, please state whether his drain resulted from wounds received in the war, or from what discovert the
16. (five, as near as you can, the nature of the wound or the character of the disease from which your husband died. Ans
17. (five here any other information you may possess relating to the service of your husband or of his death that will support the justice of your claim for aid.
ALLE THE PLACE ON THE ALL AND
and of the same of the north of all. And
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(fiven under my hand this 7
M. D.D.I.

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**(A)** 

of Virginia, approved April 2, 1902, and subsequent acts, as amended by an act approved March 10, 1908, and that the said . Arms. Principle. A. . plication and the answers to the questions therein propounded, made by the said applicant, and verily believe that the said applicant has been truthful in the said statements and answers, and that from our personal knowledge we verily believe the said applicant is justly entitled to aid under the said ast, and that we have no personal interest in the allowance of the applicant's claim.

whose name is signed to the annexed application for aid under the set of the General Assembly of Virginia, approved April 2, 1922, and subsequent sets, as amended