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DEAD FORM B.

32379

Widow's Application for a Pension

3-5-32
The Commissioner of Pensions reserves the right to call for additional testimony if he deems it necessary.

Name of Applicant

Mrs. S. J. Shaid

Anderson - County

Postoffice Palestine, Texas

Filed 1/15/16

Approved Jan 15 - 1916

Pension allowed from 1/15/16

Rejected

Commissioner of Pensions

Compliments of East Texas Genealogical Society www.rootsweb.com/~txetgs

For Use of Widows of Soldiers who are in Indigent Circumstances

THE STATE OF TEXAS

COUNTY OF Anderson

I, Mrs. Sarah Jane Shaid, do hereby make application to the Commissioner of Pensions for a pension, to be granted me under the Act passed by the Thirty-third Legislature of the State of Texas, and approved April 7, A. D. 1913, on the following grounds:

I am the widow of R. W. Shaid - deceased, who departed this life on the 6 day of Jan'y, A. D. 1916, in the county of Anderson, in the State of Texas.

I have not remarried since the death of my said husband, and I do solemnly swear 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. I was married to him on the 27 day of June, A. D. 1854, in the county of Anderson, in the State of Texas.

My husband, the said R. W. Shaid, enlisted and served in the military service of the Confederate States during the war between the States of the United States, and that he did not desert the Confederate Service. I have been a resident of the State of Texas since prior to January 1, A. D. 1900, and have been continuously since a citizen of the State of Texas. I do further state that I do not receive from any source whatever money or other means of support amounting in value to the sum of \$300.00 per annum, nor do I own in my own right, nor does anyone hold in trust for my benefit or use, estate or property, either real, personal or mixed, either in fee or for life, of the value of one thousand dollars, exclusive of the home of the value of not over \$1,000.00; nor do I receive any aid or pension from any other State, or from the United States, or from any other source, and I do further state that the answers given to the following questions are true:

- 1. What is your age? 77 years old -
- 2. Where were you born? Coler County, Illinois
- 3. How long have you resided in the State of Texas? Since 1852 continuously
- 4. How long have you resided in the county of your present residence? And what is your postoffice address? Since 1852 continuously; Mrs. S. J. Shaid, R# 2, Palestine, Tex.
- 5. Did your husband draw a pension? If so, give his file number. No - # 14,548 - Palestine, Tex.
- 6. What was your husband's full name? Reuben Eckert Shaid.
- 7. What was the date of his death? Jan'y 6 - 1916 -
- 8. In what State was your husband's command originally organized? Texas.
- 9. How long did your husband serve? If known to you give date of enlistment and discharge. Served over 3 years -

10. What was the name or letter of the company, or number of the battalion, regiment or battery of artillery in which your husband served? If he was transferred from one branch of service to another, give time of transfer, description of command and time of service. See proof in # 14,548 Anderson.

11. Name branch of service in which your husband served, whether infantry, cavalry, artillery or the navy, or if commissioned as an officer by the President, his rank and line of duty, or if detailed for special service, under the law of conscription, the nature of such service, and time of service. See proof in # 14,548 Anderson County.

12. Have you transferred to others any property of any kind for the purpose of becoming a beneficiary under this law? No -

Wherefore your petitioner prays that her application for a pension may be approved and such other proceedings be had in the premises as are required by law.

(Signature of Applicant) Mrs. Sarah Jane Shaid.

Sworn to and subscribed before me, this 14 day of January, A. D. 1916. E. V. Swift

[Seal.] County Judge Anderson County, Texas.

AFFIDAVIT OF WITNESSES

[Note.—There must be at least two creditable witnesses.]

THE STATE OF TEXAS,
COUNTY OF Anderson

Before me, E. V. Swift, County Judge of Anderson County,

State of Texas, on this day personally appeared G. W. Nash + R. J. Wallace, who are personally

known to me to be creditable citizens, who, being by me duly sworn, on oath state that they personally know that

Mrs. Sarah Jane Shaid, applicant for a pension as the widow of R. W. Shaid

deceased, is in truth and fact the widow of R. W. Shaid deceased; that they personally

know that she has not remarried since the death of her husband, for whose service in the army she claims a pension,

and that they have no interest in this claim.

(Signature of Witness) G. W. Nash

(Signature of Witness) R. J. Wallace

Sworn to and subscribed before me, this 14 day of January, A. D. 1916

E. V. Swift

[Seal.]

County Judge Anderson County, Texas.

AFFIDAVIT OF WITNESSES

[Note.—There must be at least two creditable witnesses.]

THE STATE OF TEXAS,
COUNTY OF Anderson

Before me, E. V. Swift, County Judge of Anderson County,

State of Texas, on this day personally appeared G. W. Nash + R. J. Wallace, who are personally

known to me to be creditable citizens, who, being by me duly sworn, on oath state that they personally know the

above named applicant for pension, and that they personally know that the said Sarah Jane Shaid

has been a bona fide resident citizen of the State of Texas since prior to January 1, A. D. 1900, and that they have

no interest in this claim.

(Signature of Witness) G. W. Nash

(Signature of Witness) R. J. Wallace

Sworn to and subscribed before me, this 14 day of January, A. D. 1916

E. V. Swift

[Seal.]

County Judge Anderson County, Texas.

AFFIDAVIT OF WITNESSES

(If possible, the two witnesses should have served with the applicant's husband in the army, and if so, let them, or either of them, state it in their oath; also any information regarding the army service of applicant's husband.)

THE STATE OF TEXAS, }
COUNTY OF..... }

Before me,....., County Judge of..... County, State of Texas, on this day personally appeared....., who personally known to me to be creditable citizens, who, being by me sworn, on oath state that they are personally acquainted with the foregoing applicant, and that the facts set forth and statements made in her application are correct and true, to the best of their knowledge and belief, and that they have no interest in this claim. And further make oath to the following facts touching the service of the applicant's husband in the Confederate Army; (State fully your source of knowledge) :.....

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.....

(Signature of Witness).....

(Signature of Witness).....

Sworn to and subscribed before me, this..... day of....., A. D. 191.....


[Seal.]

County Judge..... County, Texas.

CERTIFICATE OF STATE AND COUNTY ASSESSOR

I, R. R. Sadler, State and County Assessor in the County of Anderson State of Texas, do certify that Mrs. S. J. Shart whose name is signed to the foregoing application for a pension, under the Act of the Thirty-third Legislature, approved April 7, 1913, is charged on the tax rolls of said county with a homestead of the value of Three hundred fifty Dollars, and of other property, real or personal, or both, of the value of None Dollars.

Given under my hand, this 14 day of January, A. D. 1916.

R. R. Sadler
State and County Assessor. 

APPLICATION FOR TOTAL DISABILITY

COMMISSIONER OF PENSIONS,

Austin, Texas.

I, E. V. Swift County Judge of Anderson County,

have heard the testimony and facts, regarding the total disability of Pensioner No. _____, who applied for and was granted a Pension from Anderson County.

I am fully convinced beyond any reasonable doubt that Mrs. S. J. Shaid is unable to do any work, whereby she could assist self in earning a livelihood.

FROM THE TESTIMONY AND FACTS, I FIND THE PENSIONER IS:

BLIND	<u>Partially</u>	ONE LEG GONE	<u>No</u>
DEAF	<u>Partially</u>	ONE ARM GONE	<u>No</u>
CANCER	<u>No</u>	ONE EYE GONE	<u>No</u>
WOUNDED IN WAR	<u>No</u>	BED RIDDEN	<u>No</u>
AGE	<u>77 years</u>	IN BED PAST THREE MONTHS	<u>Yes</u>
LEGS GONE	<u>No</u>	BONES BROKEN	<u>No</u>
ARMS GONE	<u>No</u>	BACK BROKEN	<u>No</u>
DUMB	<u>No</u>	PROPERTY OWNED	<u>\$350.00</u>

Handwritten notes:
 Mrs. Shaid in new
 old and feeble -
 cannot handle
 walk - I am
 with disability list

For the above stated reasons, I feel fully convinced that Mr. S. J. Shaid is entitled to the privileges of the TOTAL DISABILITY LIST, and I recommend that she be placed on that roll.

Signed E. V. Swift
County Judge of Anderson County, Texas.
14 day of January 1916.

Unless all of the above lines are filled in, we cannot consider this affidavit. If File Number is unknown, please hold until you can get correct file number. Mr. R. W. Shaid, her husband was on total disability list. UNLESS you are fully convinced the pensioner is totally disabled and not partially disabled, do not recommend.



NONE but County Judge's Names will be honored on this affidavit. Write any further remarks on separate sheet.

MY PRESENT ADDRESS IS Mrs. S. J. Shaid, R # 7 - Palestine
Texas

32379

BOND

This BOND must be sworn to by the owner of the original warrant, and also signed by the owner and two sureties before it will be approved and duplicate warrant issued.

THE STATE OF TEXAS

County of Anderson

Before me, the undersigned authority, on this day personally appeared Mrs S J Shaid who, after being by me duly sworn on oath, says that she is the true owner of Confederate Pension Warrant No. 72 for the sum of Thirty Dollars, drawn by the Comptroller of the State of Texas, on _____, in favor of Mrs S J Shaid, and that the same is in fact lost or destroyed, or has not been received.

(Seal)

Mrs S J Shaid
Owner of Warrant.

Sworn to and subscribed before me this the 8 day of January, 1924
Orlando Jenkins State Auditor
for Anderson Co., Texas.

THE STATE OF TEXAS

County of Anderson

KNOW ALL MEN BY THESE PRESENTS, That we, Mrs S J Shaid, as principal, and W. F. Johnson and G. W. Starnes, as sureties, are held and bound unto W. C. HOBBS Governor of the State of Texas, and his successors in office, in the sum of Thirty Dollars, for the payment of which sum, well and truly to be made, we do bind ourselves, our heirs, executors and administrators, jointly and severally.

Whereas, the above named principal has filed with the Comptroller _____ affidavit, stating that _____ is the true owner of said Confederate Pension Warrant, drawn by the Comptroller of the State of Texas, on the date shown in the above affidavit, in favor of said payee, and that the same is in fact lost or destroyed; and

Whereas, duplicate of said Confederate Pension Warrant, in favor of the original payee, will be issued;

Now, therefore, the condition of the above obligation is such that the owner of said warrant will hold the State harmless and return to the Comptroller, upon demand being made therefor, such duplicate or copies, or the amount of money named therein, together with all costs that may accrue against the State, on collecting the same.

Given under our hands, this 8 day of January, A. D. 1924

Mrs S J Shaid Principal.
W. F. Johnson Surety.
G. W. Starnes (TX) Surety.

Approved 11th day of Jan, 1924

Lor A. Smith
Comptroller.

County Anderson

Number 32379

Address R. F. D. Box 37 Street.

Palestine, Texas.
(City or Town)

32379 78 G. W. Starnes
901-9 Crawford St.

APPLICATION FOR MORTUARY WARRANT

THE STATE OF TEXAS,

County of Anderson } I, Jewel Shaid
do hereby certify that I am the person to whom is entrusted the paying of the accounts and indebtedness of the late Mrs S. J. Shaid, who was a pensioner of the State of Texas, and whose file number was 32379 and whose original county was Anderson

The said pensioner Mrs S. J. Shaid, died on the 25 day of February, 1930 in the town of Palestine County of Anderson Texas.

The pensioner died in the home of Mrs. G. W. Starnes who was related to the pensioner as daughter

That the warrant, which application is hereby made for, shall be applied to paying all or part of the funeral expenses incurred by the said pensioner yes

I further certify that the warrant for the current quarter has not been cashed by the pensioner, to the best of my knowledge and belief.

I am related to the pensioner as (Friend) Daughter
that my postoffice address is 901 E. Crawford St., Palestine, Texas.
Street or R. F. D.

City

State

Signed Jewel Shaid

Sworn to before me this 8th day of March, 1930

Must return before 40 days expires from date of Pensioners' death

Clerk of the District Court,
~~Notary Public~~ in and for Anderson State of Texas.

CERTIFICATE OF UNDERTAKER

I, A. B. Sager, do certify that I am undertaker in the town of Palestine, County of Anderson, State of Texas that I had charge of the body of Mrs. S. J. Shaid, who died in the town of Palestine, County of Anderson, State of Texas on the 25th day of Feb. 1930. That said body was prepared for burial by me on the 25th day of Feb. 1930, and that I am of the opinion that warrant herein applied for should be issued to the said Jewel Shaid who makes the foregoing application.

Signed A. B. Sager Undertaker.

CERTIFICATE OF PHYSICIAN

I, E. W. Link, do certify that I am a practicing physician, and that I attended Mrs S. J. Shaid in his last illness, and am of the opinion that his ailments were Fracture of femur & that she died from effects of this some fourteen days afterwards

I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923.

Signed E. W. Link M.D. TX
Physician's Address Palestine Texas

32379
3-8-30

APPLICATION FOR MORTUARY WARRANT

THIS STATE OF TEXAS

County of _____
do hereby certify that I am the person to whom is entrusted the paying of the accounts and indebtedness of the late _____ who was a pensioner of the State of

Texas and whose original county was _____ and whose original county was _____ and who died on the _____ day of _____ 19____ in the town of _____ Texas.

The pensioner died in the town of _____ County of _____ Texas.

That the warrant which application is hereby made for, shall be applied to paying all or part of the funeral expenses incurred by the said pensioner.

I further certify that the warrant for the current quarter has not been cashed by the pensioner, to the best of my knowledge and belief.

I am related to the pensioner as (Wife) _____

that my residence address is _____ Street _____ St. Palestine, Texas.

Witness my hand and seal this _____ day of _____ 19____

Notary Public in and for the State of Texas

Notary Public in and for the State of Texas

Notary Public in and for the State of Texas

CERTIFICATE OF UNDERTAKER

do certify that I am undertaker in the town of _____ County of _____ State of _____

who died in the town of _____ County of _____ State of _____

and his body was prepared for burial by me on the _____ day of _____ 19____

and that I am of the opinion that the funeral expenses should be paid to the said _____ who makes the foregoing application.

Undertaker _____

COMPTROLLER'S OFFICE RECEIVED MAR 10 1933

CERTIFICATE OF PHYSICIAN

do certify that I am a practicing physician and that I attended _____ in his last illness and

and of the opinion that his ailments were _____

I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1933.

Physician's Address _____

Signed _____