bradeud a'tmoiligne to o 1861 33 YAM RECEIVED Completed Series

COMPTROLLERS RECEIVED MAY 27 1931

to embet victor).

R. F. D. or Street No. mony if he deems it necessary. the right to call for additional testi Comptroller of Public Accounts Name of Applicant

TROKVIT ÓF WITSUSSES

June 1st,

J.W.Allen

FORM B.

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

## Widow's Application for Confederate Pension

THE STATE OF TEXAS,
County (of MUTTO)
I, Mrs., do hereby make application
for a pension pursuant to the provisions of Articles 6204 to 6227, inclusive, of the Revised Civil Statutes of 1925 as amended by S. B. No. 27 passed by the Forty first Legislature at its Fifth Called Session and all other laws of this State relating thereto.
Lam a widow of deceased, who departed this life on the day of May, A. D. 90, in the county of deceased,
in the State of I have not remarried since the death of my said husband; (or in case of remarriage that I am now a widow); and I do solemnly swear that I was keyer divorced from my said husband
XXII Well
and that I never voluntarily abandoned him during his life but remained his true, faithful and lay ful wife up to the place of his death. I was married to him on the day of
A. D. O, in the county of the county of the State of the
My husband, the said , served as a Confederate
soldier (or sailor) in the war between the States of the United States; or (that he was a soldier who, under special laws of the State of Texas during said war, served in organizations for the protection of the frontier against Indian raiders or Mexican marauders); or (that he was a soldier of the militia of the State of Texas who was in active service during said war.) That my said husband served honorably from the date of his enlistment until the close of the war, (or until he was discharged or paroled in some military organization regularly mustered into the army or navy of the Confederate States until the surrender). He
was honorably discharged or paroled
(Give date and cause.)
That I have been a homa fide resident of this State continuously since the
1. What is your age, and date of birth? 85 18.46 - Wy / 6
2. How long have you resided in the county of your present residence?
3. What is your postoffice address? Jolla 100
4. Have you applied for a pension under the Confederate pension law and been rejected? 20
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4. Have you applied for a pension under the Confederate pension law and been rejected?
4. Have you applied for a pension under the Confederate pension law and been rejected?  5. If rejected, state when and where  6. Did your husband draw a pension?  7. Givel if possible, the posteffice address of your deceased husband at the time of his emissiment  8. What was four busband's full name?  8. What was four busband's full name?
4. Have you applied for a pension under the Confederate pension law and been rejected?  5. If rejected, state when and where  6. Did your husband draw a pension?  7. Givel if possible, the posterffice address of your deceased husband at the time of his enlistment
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4. Have you applied for a pension under the Confederate pension law and been rejected?  5. If rejected, state when and where 6. Did your husband draw a pension? 7. Give if possible, the plateffice address of your deceased husband at the time of his enlishment  8. What was four husband's full name?  9. In what State was your husband's command originally organized?  10. How long did your husband serve?  11. If known to you, give date of enlistment and discharge / 86 / Confederate pension law and been rejected?  12. What was the name or letter of the company, or number of the regiment 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. (If applicant's husband was a pensioner give his file number, which is evidence sufficient for proof of service.)
4. Have you applied for a pension under the Confederate pension law and been rejected?  5. If rejected, state when and where 6. Did your husband draw a pension? 7. Give if possible, the prooffice address of your deceased husband at the time of his emissment  8. What was four busband's full name?  9. In what State was your husband's command originally organized?  10. How long did your husband serve?  11. If known to you, give date of enlistment and discharge   36   Confederate    12. What was the name or letter of the company, or number of the regiment 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. (If applicant's husband was a pensioner give his file number, which is evidence sufficient for proof of service.)
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4. Have you applied for a pension under the Confederate pension law and been rejected?  5. If rejected, state when and where 6. Did your husband draw a pension? 7. Gird if possible, the nyelffice address of your decased husband at the time of his emissment  8. What was four husband's command originally organized?  9. In what State was your husband's command originally organized?  10. How long did your husband serve?  11. If known to you, give date of enlistment and discharge  12. What was the name or letter of the company, or number of the regiment 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. (If applicant's hystland was a pensioner give his file number, which is evidence sufficient for proof of service.)  13. 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, underlike law of conscription, the nature of such service, and time of service  Wherefore your petitioner prays that her application for a pension may be approved affd such other
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	ing the second contraction of the second con	AFF	IDAVI	ΓOF	WITNE	ESSES	•

[Note.—There must be at least two creditable witnesses.]	and the state of t
THE STATE OF TEXAS,	AND W
County of County	
The rectardad from the first of	must
Before me, Co	noty Judge of County,
State of Texas, on this day personally appeared	The Cal
	e personally known to me to be credible citi-
zens who being by me duly sworn, on oath state that they p	ersonally know that Mrs
, applicant for a pension as the widow of	110
deceased, is in truth and fact the widow of	deceased; that they personally
know that she has not remarried since the death of her husbar	d, for whose services in the army she claims
a pension, and that they have no interest in this claim.*	
(Signature of Witness) X	Na Beal
(Signature of Witness)	CempRocerts
Sworn to and subscribed before me, this day of	ma 31
Sworn to and subscribed before me, thisday	7 (A. D. 197)
The state of the s	algelentry
[Seal.]	mies
The second secon	CAUS.
*Where applicant has remarried it is necessary that she state facts coveried, and date of last husband's death. She must also state that she is no	w a widow.
AFFIDAVIT OF WITH	NESSES THE REPORT OF THE PROPERTY OF THE PROPE
[Note.—There must be at least two creditable witnesses.]	
THE STATE OF TEXAS,	
County of	
Before me, Salla Jacke, Cou	nty Judge of Juth county,
State of Texas, on this day personally appeared?	albeal
Com Not of On the	personally known to me to be creditable citi-
zens, who, being by me duly sworn, on oath state that they pe	
pension, and that they personally know that the said	12 / Mallew
has been a bona fide resident citizen of the State of Texas since	1/897
and that they have no interest in this claim.	
A desired that the parties of the property of the said her. I want and are delivered	
(Signature of Witness) $\times$ $\mathcal{L}$	s a preac
(Signature of Witness) X	Cent Roberts
the state of the contract of the state of th	
Sworn to and subscribed before me, thisday @	Janay, A. D. 19 3/
	& The Heart
	Birt 1
[Seal.] County	Judge County, Texas.

# REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES

## AFFIDAVIT OF WITNESSES

(If possible the one witness should have served with the applicant's husband in the army, and if so,

let him state it in his oath, also any other information regarding the army service of applicant's husband.) THE STATE OF TEXAS, WILL County of.... ....., County Judge of ......County, State of Texas, on this day personally appeared , who is personally known to me to be a creditable citizen, who, being by me sworn, on oath states that (he or she) is 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 (his or her) knowledge and belief, and that (he or she) has no interest in this claim. And further make oath to the following facts touching the service of applicant's husband in the Confederate Army: (Witness must state fully the source of (his or her) knowledge of service of applicant's husband) (Signature of Witness)\_ Sworn to and subscribed before me, this \_\_\_\_\_day of\_\_\_\_

XI

County Judge ......County, Texas.

[Seal.]

## WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

IN REPLY O.R.D.

WASHINGTON May 8, 1931.

Respectfully returned to

Mrs. Bell Wood, Route 1, Tyler, Texas.

The name J.W.Allen appears on a Company Muster Roll of Captain Thomas K. Porter's Company Light Artillery under the heading," List of Names detailed to this company from Brown's and Palmer's Regiments", for September 30 to December 31, 1861, which shows him absent sick.

This company subsequently became Captain Morton's Company Tennessee Light Artillery, Confederate States Army.

No record has been found to show whether he served with the 18th Regiment Tennessee Infantry (Palmer's) or the 3 (Clack(s) Tennessee Infantry, Confederate

States Army. John C. Brown was Colonel of the 3(Clack's) Tenn. Infantry, and no record has been found of the exact date or place of enlistment.

J.W.Allen, private, Captain Morton's Company Tennessee Light Artillery,

enlisted March 8, 1862, at New Orleans.

Company Muster Roll for November and December, 1863, last on file, shows him present. No later record has been found. C. H. Budges

Major General, The Adjutant General. By # 6./-

49771

# STATE OF TENNESSEE DEPARTMENT OF EDUCATION

P. L. HARNED, COMMISSIONER NASHVILLE

DIVISION OF LIBRARY AND ARCHIVES
JOHN TROTWOOD MOORE
LIBRARIAN AND ARCHIVIST

April 28th, 1931.

Mrs. Belle Wood, R.F.D. #1, Tyler, Texas.

My dear Mrs. Wood:

The reference I quoted you from page 191 of Clayton's History of Davidson county, Tennessee, just states a list of men who were among the "Details from Brown's and Palmer's Brigade to Porter's Battery," and the namebJ.W.Allen, private, appears in this list.

I have no further information about the record, but I suggest that if you send this record to the office of the Adjutant General at Washington, D.C. he may be able to give you fuller record. Hoping this may assist you, I am,

Very truly,

Librarian and Archivist

# REPRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES





WALTER G. RUSSELL, DIST. JUDGE 7TH JUDICIAL DIST. NAT W. BROOKS, DIST. JUDGE SPECIAL DISTRICT COURT BRADY P. GENTRY, COUNTY JUDGE NAT GENTRY, JR., COUNTY ATTORNEY

LESLIE FLORENCE, DIST. ATTORNEY W. R. WARD. COUNTY CLERK EARL PRICE. SHERIFF J. J. PIERCE. TAX COLLECTOR HENRY ALLEN. TAX ASSESSOR

CLARK SPARKS, DIST. CLERK W. A. LUCKY, COUNTY TREASURER A. P. PRESTWOOD, COUNTY AUDIT D. M. EDWARDS, COUNTY SURVEYO J. E. BILLINGSLEY, COUNTY SUPT.

## COUNTY COMMISSIONERS

H. L. CARTER, PRECINCT NO. 1 J. D. DRAKE, PRECINCT NO. 2

L. T. SHAMBURGER, PRECINCT No. 3 J. C. ALLEN, PRECINCT No. 4

TYLER, TEXAS,

July 14th. 1934.

Hon. Geo. H. Sheppard, Comptroller of Public Accounts, Austin, Texas.

Dear Mr. Sheppard:

Please revoke the stop payment order on the original mortuary warrant issued in the matter of Mrs. Amy Allen, deceased pensioner, as widow of a Confederate veteran. The warrant has come now into the hands of the proper party and the money has been spent in funeral expenses.

With kindest regards and best wishes, I am,

Judge, Smith County, Texas.

Harrant he 205/9 Dec. 1933 Smith 4977/

Mey 23, 1931.

Hon. Brady P. Gentry, County Judge, Tyler, Texas.

Dear Judge Centry:

Enclosed I am returning to you the application for pension executed by J. W. Allen of Tyler, Texas, in order that the affidavit on page 2, indicated by blue penoil mark, may be properly executed by you.

If the above request is complied with and the application returned to this office the right of Mrs. Allen as a pensioner will have due consideration.

Yours very truly,

JHI': E



State Comptroller of Public Accounts.

17

July 17, 1934

Hon. Charley Lockhart State Treasurer Capitol Building Austin, Texas

Dear Sir:

Please cancel "stop payment" order given you against warrant issued against the Pension Fund, No. 20519, amount \$100.00.

of the death of Confederate Pensioner, Mrs. Amy Allen.

Very truly yours,

**(11)** 

COMPTROLLER OF PUBLIC A C C O U N T S

JHT/g

17

July 17, 1934

Hon. Brady P. Gentry County Judge Tyler, Texas

Dear Judge Gentry:

Complying with your request of July 14th I am today lifting the "stop payment" order placed with the State Treasurer against Mortuery warrant No. 20519, amount \$100.00, issued to Mrs. Belle Wood, on account of the death of Confederate pensioner Mrs. Amy Allen.

Very truly yours,



COMPTROLLER OF PUBLIC A C C O U N T S

JHT/g

Form 763b—S843-131-5m			
	N.	The same of the sa	E. L. STARM CO., AUSTIN
APPLI	CATION FOR MORT	TUARY WARRANT 8 193	<b>3</b>
MITTE CON A PRIZA CATA PRIMA		OAKIWAKKAMI	•
THE STATE OF TEX	AS,	b An a	,
County of Scmi		, Bille CH	rora
do hereby certify that I am th	e person to whom is entrusted	the paying of the accounts and inde	ebtedness of
the late	W. allen	who was appensioner of	
Texas, and whose file number	was 4977/and whose origi	nal county was	<u> </u>
The said pensioner	mor Job,	allen,	died on the
10 th day of Agri	, 1933, in the	town of Tyler	The state of the s
County of Smul	Texas.	to 10 Min in	<i>(</i>
The pensioner died in the		Belle Wood	
who was related to the pension		·	
That the warrant, which		r, shall be applied to paying all or	part of the
funeral expenses incurred by th		nrs allen	
		r has not been cashed by the pension	oner, to the
best of my knowledge and beli	* /	NICO	
I am related to the pension	ier as (Friend)	Contract of the contract of th	and the second special section on the second section of the second section section section section section sec
that my postoffice address is	St	rector R. F. D.	
	City	Jera	R
	Signed A	UNA RICE DO	rock
Sworn to before me this	16 day of Deem	nber 19 <sup>33</sup>	
The state of the s	Commence of the second of the	E G of the	
Must return before		2,2,00	*** WE
40 days expires from	Notary Public in and f	or Driem Stat	e of Texas.
date of Pensioners' des	_ 1		
And the second s			
		, do certify that I am undert	
		, State of	
		, who	
		, State of	
		That said body was prepared for bu	
on theday of		19, and that I am of the o	pinion that
who makes the foregoing appli			
	Signed	dUno	dertaker.
^ / ^	CERTIFICATE OF PHY	YSICIAN	
$\mathbf{T} = \mathcal{N} \mathbf{Y}_1 + \mathbf{I} \mathbf{J}_1 \mathbf{J}_2 \mathbf{J}_3 \mathbf{J}_4 \mathbf{J}_5$	mant?	do certify that I am a	practicing
n in the second of the second	Bryant D.W. a.	do certify that I am a	
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n in the second of the second	$M_{N} \vee M$	1/0111	
n in the second of the second	$M_{N} \vee M$	llen in his last i	illness, and
n et	$M_{N} \vee M$	1/0111	illness, and
physician, and that I attended am of the opinion that his ailm the left Ear a	ents were Cayeur un left Dide of	llen in his last i	illness, and
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physician, and that I attended am of the opinion that his ailm the life of the correction of the name of the aforementioned and approved March 2, 1923.	ents were augus  of the opinion that the Mortuar d applicant, in accordance with	in his last in his	e issued in
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I further certify that I am the name of the aforementioned and approved March 2, 1923.	ents were au lur  of the opinion that the Mortuar  d applicant, in accordance with	in his last in his	e issued in
physician, and that I attended am of the opinion that his ailm the life of the control of the name of the aforementioned and approved March 2, 1923.	ents were augus  of the opinion that the Mortuar d applicant, in accordance with	in his last in his	e issued in

Form 763b-S843-131-5m

rv Amie allen Signed	APPLIC	ATION FOR	R MORTUA	RY WARRA	NEGITERS OFFICE
the late MAL Carry College of the lacecounts and indebtedness of the late MAL Carry College of the late MAL Carry College of the State of Texas, and whose file number was [4771] and whose original county was The said pensioner Mrs.Amie Allen , 19.33, in the town of Tyler (near) , died on the 10th day of Dec. , 19.33, in the town of Tyler (near) , died on the Mrs.Bell Weeds who was related to the pensioner as Macc 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 Mrs.Amie Allen I turther 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) Meshew Street or R. P. D.  Winena City Signed Please Street Original Country or Relationship Street or R. P. D.  Winena City Signed Please Street Original Country or Relationship Street Original Country or Relationship Street O	THE STATE OF TEXA	AS,			
the late MAL American to worm a gravated the paying of the accounts and indebtedness of the late MAL American to worm a gravated the paying of the accounts and indebtedness of Texas, and whose file number was pensioner of the State of Texas, and whose file number was pensioner as the said pensioner Mars. Amie Allen , 19.33, in the town of Tyler (near) , died on the 10th day of Dec. , 19.33, in the town of Tyler (near) , died on the Mars. Bell Weeds who was related to the pensioner as Mascs 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 Mars. Amie Allen I further certify that the warrant for the current quarter has not been cashed by the pensioner, to the best of my knowledge and bellet. I am related to the pensioner as (Friend)	County of Smith		} ,	P W Wadana	_ DEC 16 1933
Texas, and whose file number was in the said pensioner Mrs. Amie Allen , 10 33, in the town of Tyler (near)  County of Smith , Texas.  The pensioner died in the home of Mrs. Bell Teeds  Who was related to the pensioner as Mrs. Bell Teeds  Who was related to the pensioner as Mrs. Bell Teeds  Who was related to the pensioner as Mrs. Bell Teeds  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.  If 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)  Haphen  Texas  Signed  Wust return before  The day of Dac.  July 33  Wast return before  The day expires from Garden and for Smith State of Texas.  C.B. Starnes  GERTIFICATE OF UNDERTAKER  C.B. Starnes  C.B. Starnes  C.County of Smith State of Texas.  To the 19th day of Dac.  Wash and that I am undertaker in the town of Tyler (mear), County of Smith Smith State of Texas.  To the 9th day of Dac.  Wash and Dac.  County of Smith State of Texas.  CERTIFICATE OF PHYSICIAN  I, do 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.  The Gertify 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.	do hereby certify that I am the	person to whom	ls entrusted the	paying of the acco	unts and indebtedness of the State of
County of Smith The pensioner died in the home of Nice 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.  If 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) That my postoffice address is  Winone  City  Signed  Notary Public in and for Smith State of Texas  CERTIFICATE OF UNDERTAKER  CERTIFICATE OF UNDERTAKER  COUNTY of Smith State of Texas  Town of Tyler  Was a control of the body of Mrs. Amis Allen on the 9th day of Deg.  19 33. That said body was prepared for burial by me on the 9th day of Deg.  CERTIFICATE OF PHYSICIAN  I,  Occurry of Smith State of Texas  CERTIFICATE OF PHYSICIAN  I,  Occurry of Smith State of Texas  CERTIFICATE OF PHYSICIAN  I,  Occurry of Smith Signed  CERTIFICATE OF PHYSICIAN  If there 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.  CERTIFICATE OF PHYSICIAN  Signed	Texas, and whose file number	was 49771 and	whose original c	ounty was	
County of Smith The pensioner died in the home of Mrs.Bell Woods  The pensioner died in the home of Mrs.Bell Woods  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.  If 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)  Winon  City  Signed  Sworn to before me this 14th day of Dec.  Notary Public in and for Smith State of Texas.  CERTIFICATE OF UNDERTAKER  CERTIFICATE OF UNDERTAKER  CERTIFICATE OF UNDERTAKER  CERTIFICATE OF UNDERTAKER  COUNTY of Smith State of Texas.  Wars.Amis.Allen , who died in the town of Tyler thear), County of Smith State of Texas.  On the 9th day of Dec 19-33. That said body was prepared for burial by me on the 9th day of Dec 19-33, and that I am of the opinion that warrant herein applied for should be issued to the said P.T. McClung  who makes the foregoing application.  CERTIFICATE OF PHYSICIAN  I, , do certify that I am a practicing in his last illness, and and of the opinion that his ailments were.  CERTIFICATE OF PHYSICIAN  I, , do certify that I am a practicing in his last illness, and and of the opinion that his ailments were.  CERTIFICATE OF PHYSICIAN  I, , do certify that I am a practicing in his last illness, and and 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.  A A A A A A A A A A A A A A A A A A A	The State of the S			Mana	died on the
The pensioner died in the home of Mrs.Bell Woods who was related to the pensioner as Micce 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 (Friend) that my postoffice address is  Street or E.F.D.  Terrs  Signed  Winons  City  Signed  J. J				n of Tyler	(near)
who was related to the pensioner as. Niece  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 (Friend) that my postoffice address is.  Winona  City  Signed  CERTIFICATE OF UNDERTAKER  CERTIFICATE OF UNDERTAKER  To the signed of the body of the signed of the opinion that I am of the opinion that I am of the opinion 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  Signed  Signed  Signed  Signed  Signed  Signed	그, 하는데 그림 그는 그는 방법에 불편하셨다.				
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.  If urther 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)  May here  Winena  City  Signed  Street or R. F. D.  Winena  City  Signed  Street or R. F. D.  Winena  City  Signed  Signed  Street or R. F. D.  Wine return before  Notary Public in and for  Smith  State of Texas.  CERTIFICATE OF UNDERTAKER  I,  town of Winena  C. B. Starnes  that I had charge of the body of  on the 9th day of Dec.  19 33. That said body was prepared for burial by me on the 9th day of Dec.  19 33. That said body was prepared for burial by me on the 9th day of Dec.  Signed  CERTIFICATE OF PHYSICIAN  I,  On the 9th day of Dec.  CERTIFICATE OF PHYSICIAN  I,  On the 9th day of Dec.  CERTIFICATE OF PHYSICIAN  I,  On the 9th day of Dec.  CERTIFICATE OF PHYSICIAN  I,  On the 9th day of Dec.  CERTIFICATE OF PHYSICIAN  I,  On the opinion that his allments were.  CERTIFICATE OF PHYSICIAN  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  Signed  Signed  Signed  Signed  Signed  Signed  Signed	who was related to the pensione	r as N			
I further certify that I have 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)  Winona  City  Signed  Street or R. F. D.  Winona  City  Signed  Sworn to before me this 14th day of Dec. 19.33  Winona  CERTIFICATE OF UNDERTAKER  I, C.B. Starnes  I, C.B. Starnes  C.B. Starnes  Occupt of Smith State of Texas  on the 9th day of Dec. 19.33 That said body was prepared for burial by me on the 9th day of Dec. 19.33 and that I am of the opinion that warrant herein applied for should be issued to the said  P. T. NoClung  Who certify that I am a practicing physician, and that I attended in his last illness, and an 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, 1923.  When we want wallow Signed					
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) that my postoffice address is  Winona  City  Signed  Signed  Signed  Winona  Texas  Signed  Sworn to before me this  14th day of  CERTIFICATE OF UNDERTAKER  C.B. Starnes  And that I had charge of the body of  Wrs.Amie Allen  on the 9th day of  Dec.  19 33. That said body was prepared for burial by me on the 9th day of  Dec.  19 33. That said body was prepared for burial by me on the 9th day of  Dec.  CERTIFICATE OF PHYSICIAN  I,  CERTIFICATE OF PHYSICIAN  I,  CERTIFICATE OF PHYSICIAN  I,  CERTIFICATE OF PHYSICIAN  I,  Dec.  CERTIFICATE OF PHYSICIAN  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					
that my postoffice address is  Winena City  Signed  Signed  Must return before  40 days expires from Cartificate of Undertaker  Cartificate of Undertaker  that I had charge of the body of  on the 9th day of  Cartificate of the said  warrant herein applied for should be issued to the said  warrant herein applied for should be issued to the said  I,  Cartificate of Physician  Cartificate of Physician  Cartificate of Undertaker  And Allan  And Allan  And Allan  And Allan  And Cartify that I am of the opinion that warrant herein applied for should be issued to the said  Cartificate of Physician  I,  Cartify that I am a practicing in his last illness, and 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.  Cartificate of Physician  Signed  Signed  Signed  Signed  Signed  Signed  Signed  Signed  Signed					
Winona  City  Signed					
Sworn to before me this 14th day of Dac.  Notary Public in and for Smith State of Texas.  Must return before 40 days expires from Early Public in and for Smith State of Texas.  CERTIFICATE OF UNDERTAKER  C.B. Starnes , do certify that I am undertaker in the town of Winens , County of Smith , State of Texas that I had charge of the body of Wrs.Amie Allen , who died in the town of Tyler (hear) , County of Smith , State of Texas on the 9th day of Dec 19 33. That said body was prepared for burial by me on the 9th day of Dec 19 33, and that I am of the opinion that warrant herein applied for should be issued to the said P.T. McClung who makes the foregoing application.  Signed Prysician, and that I attended			Nephew		
Sworn to before me this 14th day of Dec. 19-33.  Must return before to days expires from CERTIFICATE OF UNDERTAKER  C.B. Starnes do certify that I am undertaker in the town of Winens , County of Smith , State of Texas that I had charge of the body of Mrs. Amis Allen , who died in the town of Tyler (near) , County of Smith , State of Texas on the 9th day of Dec 19-33. That said body was prepared for burial by me on the 9th day of Dec 19-33, and that I am of the opinion that warrant herein applied for should be issued to the said P.T. McClung who makes the foregoing application.  CERTIFICATE OF PHYSICIAN  I, , do certify that I am a practicing physician, and that I attended in his last illness, and am 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, 1923.  Signed Signed State of Texas.  CERTIFICATE OF PHYSICIAN  I, , do certify that I am a practicing in his last illness, and 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 Signed State of Texas.	that my postoffice address is	<del></del>	Street o	r R. F. D.	
Sworn to before me this 14th day of Dec. ,19-33  Must return before to days expires from taxe of Tensioners' death  I, C.B. Starnes , do certify that I am undertaker in the town of Winena , County of Smith , State of Texas that I had charge of the body of Wrs. Amie Allen , who died in the town of Tyler (near) , County of Smith , State of Texas on the 9th day of Dec 19-33. That said body was prepared for burial by me on the 9th day of Dec 19-33 and that I am of the opinion that warrant herein applied for should be issued to the said P.T. McClung who makes the foregoing application.  Signed B. J.		ty	•	_	Ztoto
Must return before  Must return before  O days expires from  Ease of I ensigners' death  I,  C.B. Starnes  CERTIFICATE OF UNDERTAKER  C.B. Starnes  C.B. Starnes  County of Smith  State of Texas  who died in the town of Tyler (near)  on the 9th day of Dec  on the 9th day of Dec  on the 9th day of Dec  Texas  Texas  ON THE SMITH  State of Texas  Warrant herein applied for should be issued to the said  Warrant herein applied for should be issued to the said  F.T. McClung  who makes the foregoing application.  CERTIFICATE OF PHYSICIAN  I,  O do certify that I am a practicing physician, and that I attended  in his last illness, and am 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, 1923.  Signed  Signed  Signed  Signed  Signed  Signed  Signed  Signed		e.	iomed 91	Mick	
Must return before  **Notary Public in and for Smith State of Texas.*  **CERTIFICATE OF UNDERTAKER*  I, C.B. Starnes , do certify that I am undertaker in the town of Winens , County of Smith , State of Texas.*  **Texas**  **Texas**	Sworn to before me this				
Must return before  10 days expires from  CERTIFICATE OF UNDERTAKER  1.			$\subset$	an O	
that I had charge of the body of Mrs.Amie Allen , who died in the town of Tyler (near) , County of Smith , State of Texas on the 9th day of Dec 19 33. That said body was prepared for burial by me on the 9th day of Dec 19 33, and that I am of the opinion that warrant herein applied for should be issued to the said P.T.McClung who makes the foregoing application.  CERTIFICATE OF PHYSICIAN  I, , do certify that I am a practicing physician, and that I attended in his last illness, and am 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, 1923.  Signed Signed Signed	Ι,	C.B.Starn	•8.	, do certify that	I am undertaker in the
town of Tyler (hear), County of Smith , State of Texas on the 9th day of Dec 19 33. That said body was prepared for burial by me on the 9th day of Dec. 19 33, and that I am of the opinion that warrant herein applied for should be issued to the said P.T.NcClung who makes the foregoing application.  Signed CHRISCIAN  I, , do certify that I am a practicing physician, and that I attended in his last illness, and am 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, 1923.  Signed Signed Signed	the state of the s				
on the 9th day of Dec. 19_33. That said body was prepared for burial by me on the 9th day of Dec. 19_33, and that I am of the opinion that warrant herein applied for should be issued to the said P.T. NcClung who makes the foregoing application.  Signed Status Undertaker.  CERTIFICATE OF PHYSICIAN  I,			t to the second		•
on the 9th day of Dec. 19 33, and that I am of the opinion that warrant herein applied for should be issued to the said P.T. McClung who makes the foregoing application.  Signed CB, Stances Undertaker.  CERTIFICATE OF PHYSICIAN  I,	, P1944				
Signed Stanues Undertaker.  CERTIFICATE OF PHYSICIAN  I,					
Signed CERTIFICATE OF PHYSICIAN  I,	warrant herein applied for should	d be issued to the	said	P.T.McClung	
I,	who makes the foregoing applic	ation.		CB St	annon1
I,			Signed	40,00	Undertaker.
I,					
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  Signed		CERTIFICA	TE OF PHYSIC	IAŇ	
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  Signed	I,			, do certif	y that I am a practicing
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  Signed					
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  Signed	am of the opinion that his ailme	nts were			
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the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923.  Signed					
the name of the aforementioned applicant, in accordance with Act passed by the Thirty-eighth Legislature and approved March 2, 1923.  Signed					
W Amil aller SignedPhysician's Address	· · · · · · · · · · · · · · · · · · ·		•	<del>-</del>	•
Physician's Address		Si <sub>i</sub>	gned		
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Dec. 13, 1933