2/30/1 FORM B.

Widow's Application

for Pension.

The Compressioner of Pensions reserves the oht to call for additional testimony if he necessary of Applicant.

Name of Applicant.

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East Texas Genealogical Society
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### FORM B

## For Use of Widows of Soldiers who are in Indigent Circumstances

Country of Julia M. Allena M. Allena M. Act passed by the Thirty-first Legislature of the State of Texas, and approved March 26, A. D. 1929, on fine following grounds:  I am the widow of A. D. 1929, on fine following grounds:  I am the widow of A. D. 1929, on fine following grounds:  I am the widow of A. D. 1929, on fine following grounds:  I am the widow of A. D. 1929, on fine following grounds:  I am the widow of A. D. 1929, on fine following grounds:  I am the widow of A. D. 1923, in the county of A. D. 1924, in the State of I and I day of I am the widow of I a
I, Mrs. Julia M. Aulen , do hereby make application to the Commissioner of Pensions for Arension, to be granted me under the Act passed by the Thirty-first Legislature of the State of Texas, and approved March 26, A. D. 1909, on the following grounds:  J am the widow of
Pensions for bension, to be granted me under the Act passed by the Thirty-first Legislature of the State of Texas, and approved March 26, A. D. 1909, on the following grounds:  I am the widow of
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I am the widow of A.D. A.D. A.D. A.D. A.D. A.D. A.D. A.D
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 day of Me A. D. 1855, in the county of My husband, the said of My husband the war between the States of the United States, and that he did not desert the Confederate Steries. I have been a resident of the State of Texas since prior to March 1, A. D. 1880, 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 one hundred and fifty dollars 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 over one thousand dollars; 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!  2. Where were you born?  3. How long have you resided in the State of Texas?  4. How long have you resided in the county of your present residence? And what is your postoffice address?  5. What was your husband's full name?  6. What was the date of his death?  7. In what State was your husband's command originally organized?  8. How long did your husband serve? If known to you, give date of enlistment and discharge.  9. What was the name or letter of the company, or name or number of the battalion, regiment or battery of artillery in which your husband serve? If he was transferred from one branch of service to another, give jime of artillery in which your husband served? If he was transferred from one branch of service to another,
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 day of Alle, A. D. 1857, in the county of the My husband, the said aller of the States of the United States, and that he did not desert 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 March 1, A. D. 1880, 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 one hundred and fifty dollars 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 over one thousand dollars; 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?  2. Where were you born?  3. How long have you resided in the State of Texas?  4. How long have you resided in the State of Texas?  5. What was the date of his death?  7. In what State was your husband's command originally organized?  8. How long did your husband serve? If known to you, give date of chilstment and discharge.  9. What was the name or letter of the company, or name 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 jime of artillery in which your husband served? If he was transferred from one branch of service to another, give jime of artillery in which your husband served? If he was transferred from one branch of se
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 day of day of my husband, the said day of my husband 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 March 1, A. D. 1880, 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 one hundred and fifty dollars 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 over one thousand dollars; 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!  2. Where were you born?  3. How long have you resided in the State of Texas?  4. How long have you resided in the County of your present residence? And what is your postoffice address?  5. What was the date of his death?  7. In what State was your husband's command originally organized?  8. How long did your husband serve? If known to you, give date of enlistment and discharge.  2. Who was the name or letter of the company, or name or number of the battalion, regiment or battery of antillary in which your husband serve? If he was transferred from one branch of service to another, give jime of antillary in which y
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10. Name branch of service in which your husband served, whether infantry, cavalry, artillery or the navy, or
f commissioned as an officer by the President, his rank and line of duty, or if detailed for special service, under the
aw of conscription, the nature of such service, and time of service
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### PRODUCED FROM THE HOLDINGS OF THE TEXAS STATE ARCHIVES Wherefore your petitioner prays that her application for a pension be approved and such other proceedings be had in the premises as are required by law. (Signature of Applicant) Sworn to and subscribed before me, this day of A. D. 191 🌊 County, Texas. [SEAL.] Affidavit of Witnesses. [Note.—There must be at least two credible witnesses.] THE STATE OF TEXAS, COUNTY OF SMILE , County Judge of. State of Texas, on this day personally appeared J. L. Const & Min Abrugal, who are personally known to me to be credible citizens, who, being by me duly sworn, on oath state that they personally know that M applicant for a pension as the widow of E. A. Seller elle deceased; that they personally know deceased, is in truth and fact the widow of ... 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) (Signature of Witness) Sworn to and subscribed before me, this 16 day of County Judge [SEAL.] Affidavit of Witnesses. [Note.—There must be at least two credible witnesses.] , County Judge of County, ros t & martings who are personally State of Texas, on this day personally appeared known to me to be credible citizens, who, being by me duly sworn, on oath state that they personally know the abovenamed applicant for a pension, and that they personally know that the said Juliu M. allies has been a bona fide resident citizen of the State of Texas since prior to March 1, A. D. 1880, and that they have no interest in this claim. (Signature of Witness) (Signature of Witness) Sworn to and subscribed before me, this .....

[SEAL.]

# 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 appea	red	, who are personally
· ·	eing by me sworn, on oath state that they are	
the foregoing applicant, and that the facts s	set forth and statements made in her applicati	on are correct and true, to
the best of their knowledge and belief, and	I that they have no interest in this claim. An	d further make oath to the
	applicant's husband in the Confederate Army:	and the state of t
of knowledge.) Mr. E. Q. A.	lew husband of	the apple -
cant was oran	ing a Pension a	the Time
of his death he	application be	ing made
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(Signatu	re of Witness)	
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Sworn to and subscribed before me, the	hisday of	, A. D. 191
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[Seal.]	County Judge	County, Texas.
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Certificate o	of State and County Assess	or
I, H. B. markew	<b>3</b>	
	· · · · · · · · · · · · · · · · · · ·	Assessor in the County of
State of Texas, do	hereby certify that Mrs.	a. all
whose name is signed to the foregoing applica-	ation for a pension, under the Act of the Thirty	-first Legislature, approved
March 26, A. D. 1909, is charged on the land	and personal property rolls of the said county	
of a trustee, with estate, real, personal and m		dollars.
Given under my hand,	this 16 day of Jacuy	, A. D. 191 5
	also Win	for und
	Stat	e and County Assessor.

Form 768h-\$540-225-2m.

#### APPLICATION FOR MORTUARY WARRANT

STATE OF TEXAS,	2. 000	
County of Smith	I, Mora allen	
	whom is entrusted the paying of the accounts and indebtedness of	
the late Mr Julia M.	Ollen , who was a pensioner of the	
State of Texas, and whose file number-was.	2/30 and whose original county was smith.	
The said pensioner Mrs July	lia M. allen, died on the	
	in the town of Jeles	
	, Texas.	
The pensioner died in the home of	Her own home	
who was related to the pensioner as		
	s hereby made for, shall be applied to paying all or part of the ex-	
penses incurred by the said pensioner.	Mrs Julia M. allen	
_	he current quarter has not been cashed by the pensioner, to the	
best of my knowledge and belief.	- D	
I am related to the pensioner as (Frier	ad) aughler	
that my postoffice address is 200	West Bow. Street Lyler Lyas	
Tyles	Street or R. F. D. Levises	
City	State O CA	
anth	Signed Nora allen.	
Sworn to before me this day o	f June , 1925	
<b>2</b> 110222 00 10220 002000000	(/ R.O.Collies	
N.	tary Public in and for State of Texas.	
No	tary Public in and for State of Texas.	
·	Barrier 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
	IFICATE OF UNDERTAKER	
QI Day		
$I, \qquad f = 0$	do certify that I am undertaker in the	
town of Jyler Count		
that I had charge of the body of	who died in the	
town of County of	State of July	
on the day of sine	1925. That said body was prepared for burial by me	
on the 16 day of June	d to the said his fort all um of the opinion that	
warrant herein applied for should be issue	d to the said	
who makes the foregoing application.	7 Dairiel	
•	Signed Undertaker.	
	. //	
CERTIFICATE OF PHYSICIAN		
I. a. M. Calla	, do certify that I am a practicing	
physician, and that I attended.	do certify that I am a practicing in his last illness, and only age and Strake of	
am of the opinion that his ailments were	and age and strake of	
Deetelys: (The	me plegia)	
γ 3 2 6	Y / J	
I further certify that I am of the opi	nion that the Mortuary Warrant above requested should be issued	
	ant, in accordance with Act passed by the Thirty-eighth Legislature	
1	_	
· •	Signed and Callarvay M.D.	
Physicia	Signed and Callervay M. D	
	/ (TV)	
•		
Must return before		
	40 days expires from	
	date of Pensioners' death	

D 1355