

# Fill and Return

7393

FORM B-1

No. A. 7393

## Application of Indigent Widow of Confederate Soldier or Sailor, for a Pension Under the Laws of the State of Oklahoma

EVERY QUESTION MUST BE FULLY ANSWERED. WRITE THE ANSWERS CAREFULLY, USING INK. APPLICATION MUST BE SWORN TO BEFORE SOME OFFICER AUTHORIZED TO ADMINISTER OATHS, AND FILED WITH AND DULY APPROVED BY THE COUNTY JUDGE OF THE COUNTY WHEREIN THE APPLICANT LIVES. READ THE ENTIRE APPLICATION BEFORE BEGINNING. OBSERVE THE INSTRUCTIONS IN FINE PRINT UNDER THE LINES. MAKE YOUR ANSWERS EXPLICIT.

STATE OF OKLAHOMA, COUNTY OF Pontotoc ss:

I, the undersigned, the widow of a Confederate Soldier (or Sailor), do hereby make application for a pension, to be granted me according to the laws of the State of Oklahoma, and under oath I make answer to the following questions:

1. What is your FULL NAME? Mandy Anderson  
Give your first name, your middle initial and your surname.
2. What is your post office address? Stonewall Route 1xx Oklahoma
3. What is your street, route or box number? Route 1
4. Are you an actual resident of the State of Oklahoma? yes Of what county? Pontotoc
5. How long have you lived in the State of Oklahoma continuously? forty years
6. Where were you born? Texas What is your age? 79
7. Have you ever applied for a pension anywhere? no Where? \_\_\_\_\_ When? \_\_\_\_\_
8. If so, were you granted a pension? \_\_\_\_\_ If not, why not? \_\_\_\_\_
9. Do you receive any income, annuity, pension, salary, wages, fees, money or any other means of support, from any source whatever? yes If so, state in detail the source and amount thereof.  
Jack Anderson, my son clothes and feeds me, but I receive no money from any ~~whatsoever~~ source whatsoever
10. Do you, your wife or both of you, own a home, or property of any kind, either real, personal or mixed (household goods and wearing apparel not included), either in fee simple, for life, or in your own right, or an interest therein, or does anyone hold in trust for your benefit or use, any such property? (Answer yes or no.) no
11. If so, give value of said property over and above all encumbrance \_\_\_\_\_
12. What is your physical condition? poor (Rhematic) Are you able to work? no
13. What occupation are you engaged in? none
14. Are you an inmate of any public home or institution, charitable or otherwise? no
15. Do you apply for a pension because you are indigent and unable to earn a livelihood by manual labor? yes
16. What is your husband's FULL NAME? Marion Francis Anderson
17. Is the man named in answer to question 16 above, the one upon whose military service you base this claim for a pension? yes
18. Did you abandon your husband and live separate from him until his death? no
19. When were you married to him? 1883 Where? Burnett, Texas
20. When did he die? Jan 7, 1900 Where? Stonewall, Oklahoma
21. Did he ever draw a pension? no State fully when and where \_\_\_\_\_
22. Did he serve in the Confederate infantry, cavalry, artillery or navy? Do not know Cav. I think
23. In what state was his command organized or from what state did he enlist? Texas
24. When did he enlist? Feb. 18, 1862 Where? Texas, Dallas How long did he serve? Till end of war
25. What was the name or letter of his company, battery or ship? Do not know Co. B I think
26. State the name and number of his regiment or battalion. 15th Texas Cavalry
27. To what other commands if any was he ever transferred? do not know
28. If possible, state the names and rank of his officers. do not know
29. How was he released from the Confederate service? (Captured, paroled or honorably discharged?)  
Honorably discharged
30. When? \_\_\_\_\_ Where? Camp Ford, Texas
31. Was he a commissioned officer? no State rank and date of his commission Inmate
32. Was he detailed for special service in an armory or shop for the maintenance of the army or navy? \_\_\_\_\_ State fully.  
was on sick leave for three or four months
33. Have you remarried since his death? no When? \_\_\_\_\_ Where? \_\_\_\_\_
34. Are you separated or divorced from him? no he is dead
35. When did he die? Jan 7, 1900 Where? near Defalo, Oklahoma



# Fill Affidavit No. 1

**Affidavit No. 1. Residence and Widowhood. By Two Citizens Who Know the Applicant Has Resided in the State of Oklahoma Five Years Continuously Before Filing Application, and That She is Now a Widow.**

STATE OF OKLAHOMA, COUNTY OF Pocahontas ss:  
 Before me Geo W McKay in and for said county and state, on this 13  
 County Judge, Notary Public or Justice of the Peace.  
 day of July 1931 personally appeared R N Gibson whose ad-  
 dress is Sidnewall Okla, and Geo W McKay whose address  
 is Sidnewall Okla, who are personally known to me to be credible citizens, who by me being duly  
 sworn, each for himself depose and saith:

That he is personally acquainted with the within named applicant for pension; that he has read the within and foregoing application and to the best of his knowledge and belief the statements therein contained are true; that to his knowledge said applicant is now and has been a bona fide resident and citizen of the State of Oklahoma for 30 years next preceding this date; that said applicant is in truth and in fact the widow of the man named in this application upon whose military service she bases this claim for pension; that the applicant's habits are good and free from dishonor; and that he knows of no reason why said applicant should not be granted a pension under the laws of Oklahoma; and further, that he has no interest whatever in this claim for a pension.

SUBSCRIBED AND SWORN TO BEFORE ME THIS 13  
 DAY OF July A. D. 1931  
Geo W McKay  
 Notary Public  
 In and for said County and State.  
 (SEAL)

R. N. Gibson  
Geo W McKay  
 SIGNATURES OF TWO WITNESSES  
 My commission expires Jan 15 1933

**AFFIDAVIT NO. 2. PROOF OF SERVICE IN THE CONFEDERATE ARMY OR NAVY—BY TWO COMRADES IF POSSIBLE**

STATE OF on file at Washington City COUNTY OF Washington City ss:  
 Before me \_\_\_\_\_, a \_\_\_\_\_ in and for said county and  
 state, on this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_, personally appeared \_\_\_\_\_  
 whose address is \_\_\_\_\_, and \_\_\_\_\_, whose address is \_\_\_\_\_  
 \_\_\_\_\_, both known to me to be credible citizens, and after being duly sworn by me, each for  
 himself depose and saith:

That he knows personally that \_\_\_\_\_, deceased husband of the within named applicant  
 Give his full name.  
 served in the Confederate army (navy) from \_\_\_\_\_ 186\_\_\_\_, until \_\_\_\_\_ 186\_\_\_\_, in  
 Company (or Battery) \_\_\_\_\_ of the \_\_\_\_\_ Regiment of \_\_\_\_\_  
 Letter. Give number and name. Infantry, Cavalry or Artillery.  
 that his officers were \_\_\_\_\_  
 that he served honorably and did not desert at any time, but remained true to his colors, that he was released from service  
 on the \_\_\_\_\_ day of \_\_\_\_\_, 186\_\_\_\_, at \_\_\_\_\_ by reason of \_\_\_\_\_  
 \_\_\_\_\_  
 State fully why and by what method—honorable discharge, capture, parole, etc., and by what authority.

Affiants further state that they know these statements to be true because of having served themselves in the Confederate Army (Navy).  
 \_\_\_\_\_, affiant first above named, states that he served in Company \_\_\_\_\_  
 of \_\_\_\_\_ Regiment of \_\_\_\_\_, from \_\_\_\_\_ 186\_\_\_\_  
 until \_\_\_\_\_ 186\_\_\_\_  
 \_\_\_\_\_, affiant last above named, states that he served in Company \_\_\_\_\_  
 of \_\_\_\_\_ Regiment of \_\_\_\_\_, from \_\_\_\_\_ 186\_\_\_\_  
 until \_\_\_\_\_ 186\_\_\_\_

Affiants declare that they have no interest in this claim for a pension, and further state:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_  
 DAY OF \_\_\_\_\_ A. D. 19\_\_\_\_  
 \_\_\_\_\_  
 In and For said County and State.  
 (SEAL)

(SIGNATURES OF TWO COMRADES)  
 My commission expires \_\_\_\_\_ 19\_\_\_\_

NOTE: There must be two witnesses to each of the affidavits above. Both affidavits must be acknowledged before some officer authorized to administer oaths, which officer must express his title and affix his seal. Signatures by mark must be witnessed by two persons. If additional affidavits are needed, or it is necessary to send to distant points to secure proof of service, copies of Affidavit No. 2 may be made on separate sheets, and when executed, attached to the application proper. If applicant has a parole, discharge or other documentary evidence, it should be attached to the application, which, when completed, SHOULD BE SENT TO THE COUNTY JUDGE of the county wherein the applicant lives.

Form B-1

No. A 7393

Application for Pension for Widow of Confederate Soldier or Sailor.

DO NOT WRITE BELOW THIS LINE

AMANDA W. ANDERSON

STONEMALL.

R-1

P. O.

St. R., Bx. No.

8-17-1931

Disallowed

Allowed 9-2-1931

No. P. 6114

Allowed from 7-1-1931

Amt. \$

per month.

Class

Reconsidered and allowed

From Amt. \$ No. P.

1177 Watauga Commissioner.

THIS SPACE BELOW FOR USE OF COUNTY JUDGE ONLY

State of Oklahoma, County of Pontotoc

Filed in the office of the County Judge of said county and state this 13th day of July 1931

It is hereby recommended that the within named applicant for pension be granted a pension, if found eligible by Commissioner.

(SEAL) [Signature] County Judge.

County Judge Must Approve

Write for receipt 8-17-31

CO-OPERATIVE PUBLISHING COMPANY, DENVER, COLO. 54548

NOTE: There must be two witnesses to each of the affidavits above. Each affidavit must be acknowledged before some official authorized to administer oaths, which official must sign the affidavit and file the same. Affidavits by mail must be witnessed by two persons. If additional affidavits are needed, or if it is necessary to send affidavits to some point of delivery, copies of Affidavit No. 2 may be made on separate sheets, and when completed, attached to the application proper. If applicant has a special discharge or other documentary evidence, it should be attached to the application, which, when completed, should be sent to the court where the applicant lives.

(SIGNATURES OF TWO COMRADES)

RECORDED AND SWORN TO BEFORE ME THIS

DATE OF

In and for said County and State

My commission expires

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON

August 25, 1937.

IN REPLY  
REFER TO ORD.

Respectfully returned to

Commissioner,  
Confederate Pension Department,  
State of Oklahoma,  
Oklahoma City, Oklahoma.

The records show that Francis M. Anderson, not borne as Marion Francis Anderson, private, Company B, 15th Regiment Texas Cavalry, (2nd Regiment Johnson's Brigade), Confederate States Army, enlisted February 18, 1862, at Dallas, Texas, age 21 years.

Muster roll for February 18, to June 30, 1862, shows him present.

Muster rolls from September and October, 1862, to March and April, 1864 last roll on file, show him absent "at home on sick furlough at the surrender No later than January 11, 1863."

*C. H. Bridges*  
Major General,  
The Adjutant General.  
By *J. J. J.*

CLAUDE V. THOMPSON  
COUNTY JUDGE  
PONTOTOC COUNTY  
ADA, OKLAHOMA

July 7, 1931

Commissioner of Pension  
State Capitol Building  
Oklahoma City, Oklahoma

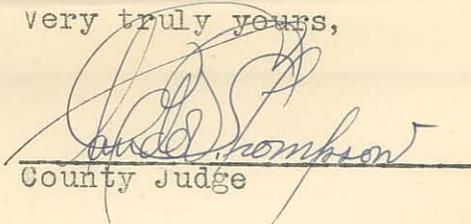
in-re: Widow of Marion  
Francis Anderson. Con-  
federate Veteran.

Dear Sir:

Mandy Anderson, widow of the above named  
Confederate Veteran, wishes to apply for a  
pension, as provided for in Chapter 133,  
Session Laws of 1925. Please send me the  
blank you use for this application.

Thanking you very much for this courtesy,  
I remain,

very truly yours,

  
County Judge

cvt-p

Sent by 7-8-31

THE COMMITTEE ON THE JUDICIARY

**Congress of the United States**  
**House of Representatives**  
**Washington, D. C.**

Ada, Oklahoma

August 13, 1931

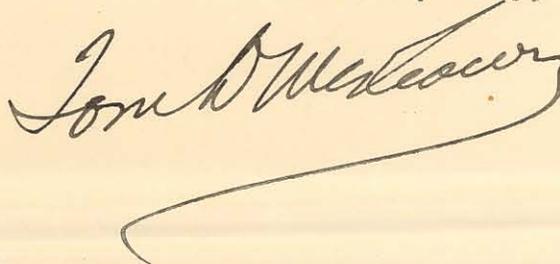
The Confederate Pensions Department  
Capitol Building  
Oklahoma City, Oklahoma

Dear Sir:-

Enclosed you will please find an application  
for a pension of Mrs. Mandy Anderson, whose address is  
R F D # 1, Stonewall, Oklahoma.

With good wishes, and much respect, I am

Yours very truly,

A handwritten signature in cursive script, reading "Tom D. McKeown". The signature is written in dark ink and is positioned below the typed name "Yours very truly,". The signature is written in a fluid, connected style with a long, sweeping underline that extends to the right.

Application Number 7393

STATE OF OKLAHOMA: CONFEDERATE PENSION DEPARTMENT,  
OKLAHOMA CITY, OKLA.

8-17-1931

THE ADJUTANT GENERAL,  
WAR DEPARTMENT,  
WASHINGTON, D. C.

SIR:

I have the honor to request that you furnish us with a copy of any record you may have of the Confederate States Army service of:-

1. Name under which enlisted: MARION FRANCIS ANDERSON.
2. Residence at enlistment: TEXAS.
3. Place of enlistment: DALLAS. TEXAS
4. Date of enlistment: FEB. 18 1862 5. Date of discharge: 1865 at CAMP FORD TEXAS
6. Company and Regiment in which served: B. (think) 15th CAVALRY  
Company Regiment
7. Nature of duties performed: \_\_\_\_\_
8. Names of some of Company officers: \_\_\_\_\_
9. Names of some of enlisted men in company: \_\_\_\_\_
10. Purpose for which it is desired to use the information if furnished: PENSION FOR WIDOW.

RECEIVED  
AUG 21 1931  
OLD RECORDS DIV.

35 Received A. G. O. AUG 20 1931

Respectfully,

A. P. Watson  
Commissioner.

REPRESENTING

**Great American**  
Insurance Company  
New York

WESTERN DEPARTMENT  
310 SOUTH MICHIGAN AVENUE  
P. O. BOX 758  
CHICAGO

**CASE & GIBSON**  
INSURANCE

FIRE, TORNADO, WINDSTORM, HAIL,  
EXPLOSION, RENTS, PROFITS, EARTH-  
QUAKE, COMMISSIONS, AUTOMOBILE,  
MOTORCYCLE, LEASEHOLD, WAR RISK,  
HULLS, CARGOES, INLAND MARINE,  
RIOT AND CIVIL COMMOTION,  
FLOATERS, INLAND TRANSPORTA-  
TION, MARINE, REGISTERED MAIL,  
MAIL PACKAGE, TOURIST BAGGAGE,  
SPRINKLER LEAKAGE, USE AND OC-  
CUPANCY.

STONEWALL, OKLA.

July 12-1932

Pension Commissioner  
Oklahoma City, Okla.

P-6114

Dear Sir \_\_\_\_\_

The September claim for  
Amenda N. Anderson was duly  
signed and mailed back to your  
office as usual. If you do not  
receive same in a few days — please  
send another claim and it will  
be duly executed

Very Truly Yours

Pete Anderson  
Stonewall, Okla.



# The First State Bank

P-6114

Stonefall, Okla.

October 10, 1933.

RECEIVED  
OCT 11 1933  
CONFEDERATE PENSIONS

Pension Commissioner,  
Capitol Building,  
Oklahoma City, Oklahoma.

Dear Sir:

We are writing this letter for Mr. J.H. Anderson who wants some information regarding the check the State mailed to his mother, Amanda W. Anderson. The payee of this check is dead and Mr. J.H. Anderson wants to know if there is any way to get the money of the warrant in order to take care of the burial expenses and etc.

Will you kindly write Mr. Anderson relative to this matter.

Very truly yours,

*F. L. Gibson*  
Cashier

R ✓ Pl ✓ Cd ✓ List ✓ Ag ✓

October 11, 1933.

P-6114

Mr. F. L. Gibson,  
Cashier First State Bank,  
Stonewall, Oklahoma.

In re: Amanda W. Anderson.

Dear Sir:

We have your letter of October 10th and are so very sorry to learn therefrom that Mrs. Amanda W. Anderson is deceased. We ask that you kindly extend to her family our sympathy in their sorrow.

If Mr. J. H. Anderson, the son, will give us the date of his mother's death we will be only too glad to advise him in regard to the pension warrant now in his possession; we cannot do so, though, until we do have this date. Please ask him to write us at once.

Thanking you for the favors asked above, and for your letter,  
I am

Very truly yours,

Clerk.



# Pension Department

STATE OF OKLAHOMA

Oklahoma City

October 11, 1933.



RECEIVED  
OCT 16 1933  
CONFEDERATE PENSIONERS

*July 7<sup>th</sup>*

*P-6114*

P-6114

Mr. F. L. Gibson,  
Cashier First State Bank,  
Stonewall, Oklahoma.

In re: Amanda W. Anderson.

Dear Sir:

We have your letter of October 10th and are so very sorry to learn therefrom that Mrs. Amanda W. Anderson is deceased. We ask that you kindly extend to her family our sympathy in their sorrow.

If Mr. J. H. Anderson, the son, will give us the date of his mother's death we will be only too glad to advise him in regard to the pension warrant now in his possession; we cannot do so, though, until we do have this date. Please ask him to write us at once.

Thanking you for the favors asked above, and for your letter,  
I am

Very truly yours,

*Mabelle Etter*  
Clerk.

*This lady died on  
July 27 - 1933 - Thanks  
John Gibson,  
Cashier*

October Sixteenth,  
1933

P-6114

Mr. F. L. Gibson,  
Cashier First State Bank,  
Stonewall, Oklahoma.

Dear Sir:

Your letter of recent date received this morning, and in reply would say that Mr. J. H. Anderson, son of the deceased pensioner Mrs. Amanda W. Anderson, may now cash the warrant No. 13833 which he holds, and apply the money on funeral expenses. Please have him indorse this warrant with his mother's name, by himself as son and get two persons who know him to sign with him.

We have had cases where no notification of death was sent us and where we later found the pensioner had died before the claim which the warrant in question covered had been signed; was signed after the death by some member of the family, sent on to us and the warrant issued. That is the reason we were so particular in regard to the date of Mrs. Anderson's death. Since she lived until nearly the end of the first month of the quarter which this warrant covered, we feel sure she signed the claim herself and therefore are satisfied that the son should have the money.

With thanks to you for your kindly interest in this matter,  
I am

Yours very truly,

Clerk

COMMISSIONER OF PENSIONS  
 OKLAHOMA CITY, OKLAHOMA  
 DEPARTMENT NO. 69  
 Filed .....

PENSION NO.

In Account With

6114

AMANDA W ANDERSON  
STONEWALL OKLA

P. O. Address

*Dec 31*  
*7-27-33*

For quarter ending..... **DEC 31 1933** .....

Amt. Claimed

**\$ 81.00**

The State Auditor is hereby authorized to deliver warrant issued in payment of this claim to the Commissioner of Pensions, who is authorized to mail said warrant to claimant at address hereinafter stated.

I, the undersigned claimant, hereby declare that I am the identical person to whom the pension hereinabove claimed was granted; that I am a resident of the State of Oklahoma, and have not been absent therefrom for a period of more than six consecutive months, last past; that the conditions existing at the time of making my application and upon which the pension was originally granted, exist; that I have full knowledge of the above and foregoing account; that the same is just, correct, due and according to law, and that the amount claimed, after allowing all just credits, is now due and wholly unpaid.

**Petitioner Must Sign Name Exactly As It is Written Above, Using Ink**

GIVE YOUR PERMANENT ADDRESS:

P. O. ....  
 Route ..... Box .....  
 St. No. ....

*Amanda W. Anderson*  
*A. W. Anderson*  
 Pensioner sign on this line as above written. Must be signed in the presence of two citizens who must also sign the claim as witnesses.

On this *15* day of *Oct*, 193*3*, personally appeared the above named pensioner before the undersigned witnesses, and in their presence duly signed the foregoing claim.

SIGNATURES  
OF TWO  
WITNESSES

*A. W. Anderson* Address *Stonewall Okla*  
*F. B. Hall* Address *Stonewall Okla*



**DATE, SIGN AND RETURN AT ONCE**