

Application of Indigent Widows 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 Atoka, 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? Tillitha Bain
2 What is your post office address? Caddo, Oklahoma
3 What is your street, route or box number?
4 Are you an actual resident of the State of Oklahoma? YES Of what county? Atoka
5 How long have you lived in the State of Oklahoma? five years
6 Where were you born? Mississippi What is your age? 78 yrs
7 Have you ever applied for a pension anywhere? YES Where? Arkansas When? 1914
8 If so, were you granted a pension? YES If not, why not?
9 Do you receive any income, annuity, pension, salary, wages, fees, money or other means of support, from any source whatever? NO If so, state in detail the source and amount thereof.
10 Do 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 an itemized statement of each piece, article or head, and the assessed value of each:

12 Have you transferred or sold property of any kind within the last two years? NO If so, state fully the amount, value and circumstances.

13 Have you a home of your own? NO If not, with whom do you live? H.T. Paudree
14 If related to the person you live with, state what relation. Son-in-law
15 Have you any relatives or connections whose natural duty it is to provide for you? (State fully) NO

16 What is your physical condition? very poor health Are you able to work? NO
17 What occupation are you engaged in? none
18 Are you an inmate of any public home or institution, charitable or otherwise? NO
19 Do you apply for a pension because you are indigent and unable to earn a livelihood by manual labor? YES

20 What was your husband's FULL NAME? Francis M. Bain

21 Is the man named in answer to question 20 above, the one upon whose military service you base this claim for a pension? YES
22 Have you remarried since his death? NO

23 When were you married to him? 1867 Where? Chattanooga Tennessee
24 When did he die? 1903 Where? Oklahoma

25 Did he ever draw a pension? NO State fully when and where.
26 Did he serve in the Confederate infantry, cavalry, artillery or navy? Cavalry
27 In what state was his command organized or from what state did he enlist? Arkansas

28 When did he enlist? 1861 Where? Ark How long did he serve? 4 years

29 What was the name or letter of his company, battery or ship? Co G First Reg, Ark Cavalry
30 State the name and number of his regiment or battalion. First

31 To what other commands if any was he ever transferred?
32 If possible, state the names and rank of his officers.
33 How was he released from the Confederate service? (Captured, paroled or honorably discharged.) Why? When?

34 Was he a commissioned officer? State rank and date of his commission.
35 Was he detailed for special service in an armory or shop for the maintenance of the army or navy? State fully.

I, the undersigned applicant, do solemnly swear that the foregoing answers are all true and complete, and I do further 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, and that I know of no reason why I am not entitled to receive a pension.

IF APPLICANT SIGNS BY MARK HAVE TWO WITNESSES TO MARK SIGN HERE

Witness signatures: Mammie Murray, Bill Murray
My commission expires Jan 25 1926

Applicant sign: Tillitha X Bain
Subscribed and sworn to before me this twelfth day of March A.D., 1923
Howard P. Paudree, Notary Public
Atoka County, Oklahoma

NOTE: It is unlawful for anyone to charge or receive a fee, either directly or indirectly, for the procuring of a pension, or for taking the acknowledgments or oaths required herein. See that all the questions are answered and that you have listed all of your property, whether taxable or not, except household goods and wearing apparel. If applicant cannot write he must sign by mark, show the mark between the words "her" and "mark," and have two witnesses thereto sign on the lines for that purpose.

**AFFIDAVIT NO. 1. RESIDENCE AND WIDOWHOOD. BY TWO CITIZENS WHO KNOW THE APPLICANT HAS RESIDED IN THE STATE OF OKLAHOMA SINCE FEBRUARY 25, 1914, AND THAT SHE IS NOW A WIDOW.**

STATE OF OKLAHOMA, COUNTY OF Atoka ss; [Notary Public]

Before me H. Faudree in and for said county and state, on this 13th day of March 1915, personally appeared C. J. Faudree whose address is Atoka Oklahoma, and Tobitha Faudree whose address is Atoka Oklahoma, N.Y.A. L.M.O., 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 Five 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 she has not remarried since his death; 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 13th DAY OF March A.D., 1915.

Howard Faudree Tobitha Faudree  
Atoka County Okla [SIGNATURES OF TWO WITNESSES]

In and for said County and State (SEAL) My commission expires Jan 25 1916

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

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_, ss:

Before me \_\_\_\_\_, a \_\_\_\_\_ in and for said county and state, on this \_\_\_\_\_ day of \_\_\_\_\_ 1915, 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, served in the Confederate army (navy) from \_\_\_\_\_ 186, until \_\_\_\_\_ 186, in Company (or Battery) \_\_\_\_\_ of the \_\_\_\_\_ Regiment of \_\_\_\_\_; 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., 1915.

[SIGNATURES OF TWO WITNESSES]

In and for said County and State (SEAL) My commission expires \_\_\_\_\_ 1915

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 5234

Application for Pension for Widow of Confederate Soldier or Sailor

DO NOT WRITE BELOW THIS LINE

Tobitha Faudree  
 P. O. Cadde  
 St. R., Bx. No. R-3  
 Filed in Pension Office 3-16-23

Disallowed

Allowed 3-16-23 No. P. 4302  
 Allowed from 4-1-23 Amt. \$ \_\_\_\_\_ per month.

Reconsidered \_\_\_\_\_ and \_\_\_\_\_ allowed

From \_\_\_\_\_ Amt. \$ \_\_\_\_\_ No. P. \_\_\_\_\_

Chas. Stewart  
By \_\_\_\_\_

THIS SPACE BELOW FOR USE OF COUNTY JUDGE ONLY

State of Oklahoma, County of Atoka

Filed in the office of the County Judge of said county and state this 14th day of March 1915

It is hereby recommended that the within named applicant for pension be granted a pension. [granted—refused]

Chas. Stewart  
 County Judge

(SEAL) THIS APPLICATION MUST BE FILED WITH AND APPROVED BY THE COUNTY JUDGE OF THE COUNTY WHEREIN THE APPLICANT RESIDES.

Franklin Printing Co., Oklahoma City, Okla.



PROBATE DAYS:

MONDAY AND SATURDAY OF  
EACH WEEK

Otis H. Presson,  
~~J. M. HUMPHREYS~~ COUNTY JUDGE

COUNTY COURT  
ATOKA COUNTY

5234  
COURT TERMS:

FIRST MONDAY { JANUARY  
APRIL  
JULY  
OCTOBER

ATOKA, OKLAHOMA

March 14th 1923,

The Commissioner of Pensions,  
Oklahoma City Okla.

Dear Madam:-

Find enclosed application of Tillitha Bain  
of Caddo, R.F.D No 3, together with a certificate  
of Auditor of State of Arkansas showing that she  
has been enrolled as a confederate Pensioner  
in that state.

Should there be any further requirements,  
communicate with her at the address given.

Yours truly,

*Otis H. Presson*  
County Judge.



# Pension Department

STATE OF OKLAHOMA

Oklahoma City



C. J. STEWART  
COMMISSIONER  
LOLA WATSON EIKNER  
SECRETARY  
MABELLE ETTER  
CLERK

P4302

P-4302, Tilitha Bain, died Aug 14. 1927

yes we cashed the check and used  
it on the funeral expenses and I  
appreciate the sympathy and also  
past favors shown us by the Department  
Yours Very Sincerely

H. T. Faudsee  
Caddo Okla

P-4302

Waddo Okla  
Oct 7 1929

Pension Department

Oklahoma City  
Okla

Dear Sir.

I am writing you to let  
you know that Billieha Bain  
which has been getting a Pension  
is dead. Pension No 4302  
as I was her survivor she  
died at my house.

Yours Respectfully

H. S. Faudree  
and Mrs H. S. Faudree

✓ R ✓ Pl ✓ Cd ✓ List  
Excepting Date

Oct. 23, 1929.

P-4302

Mr. H. F. Faudree,  
Caddo, Oklahoma.

Dear Sir:

Your letter telling us of the death of your wife's mother, Mrs. Tilitha Bain, at hand. We surely are sorry about this death and extend to Mrs. Faudree and all others of the family our deep sympathy.

You did not speak of cashing the pension warrant which we mailed to Mrs. Bain on Oct. 5th, but we are presuming that you did so, and that you applied the money on funeral expenses. You were at liberty to do this, and we are glad that you could have the increased amount of \$120.00 at this particular time, for this particular purpose.

You did not give us the date of death, and since we need this information for our records will ask that you kindly fill out and return the enclosed blank at once.

With sympathy and kind wishes to you all, we are

Yours very sincerely,

CONFEDERATE PENSION DEPARTMENT,  
C. J. STEWART, COMMISSIONER.

By

Clerk.

QUARTERLY CLAIM BLANK

STATE OF OKLAHOMA

COMMISSIONER OF PENSIONS  
OKLAHOMA CITY, OKLAHOMA  
DEPARTMENT NO. 69

Filed -----

PENSION NO.

4302

TILITHA BAIN

In Account with

R-3

CADDO OKLA

P. O. Address

For quarter ending -----

DEC 31 1929

Amt. Claimed

**\$120.00**

*Deceased*

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, still 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. -----

*Tilitha Bain is Dead*

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 ----- day of ----- 192-----, personally appeared the above named pensioner before the undersigned witnesses, and in their presence duly signed the foregoing claim.

SIGNATURES  
OF TWO  
WITNESSES

*Mrs. H. T. Faudree her daughter Caddo Okla*  
Address -----  
*and H. T. Faudree* Address *Caddo Okla*

DATE, SIGN AND RETURN AT ONCE

