

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 Bryan, 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? Martha N. Woodward
Give your first name, your middle initial and your surname.
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? Bryan
5. How long have you lived in the State of Oklahoma continuously? 24 years
6. Where were you born? Jefferson County, Ala. May 16th 1851 What is your age? 70
7. Have you ever applied for a pension anywhere? no Where? When?
8. If so, were you granted a pension? X If not, why not?
9. Do you receive any income from any source whatever? no If so, state amount thereof.
Yes or no.
10. Do you own property of any kind, either real, personal or mixed (household goods and wearing apparel not included) 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 Are you able to work? no
13. What occupation are you engaged in? Housewife. 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 was your husband's FULL NAME? Jacob Andrew Woodward
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. Have you remarried since his death? no Did you abandon your husband and live separate from him until his death? no
By Rev. McKamie.
19. When were you married to him? June 26th 1873 Where? Whitesboro, Tex.
20. When did he die? July 3d 1906 Where? Caney, 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? Cavalry
23. In what state was his command organized or from what state did he enlist? Arkansas
24. When did he enlist? Dec. 3d 1861 Where Carroll Co. Ark. How long did he serve? close of War
25. What was the name or letter of his company, battery or ship?
26. State the name and number of his regiment or battalion. Pvt. Clark's Co. B. First Battalion
27. To what other commands if any was he ever transferred? None known
28. If possible, state the names and rank of his officers. Reg. commanded by Col. R. Stirman
29. How was he released from the Confederate service? (Captured, paroled or honorably discharged?)
Paroled. Belonged to Camp Cooper #1431 Caddo, Okla.
When? Where?
30. Was he a commissioned officer? no State rank and date of his commission.
31. Was he detailed for special service in an armory or shop for the maintenance of the army or navy? State fully.
Not known.

1821

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

A.B. McCoy
C.L. Meadler

Martha W^{hm} Woodward
Applicant sign ~~and~~ name, middle initial and surname

Subscribed and sworn to before me this 22nd day of October A. D., 1921.

My commission expires July 23d 1922

A. R. Riechy
Signature and title of officer

(SEAL)

Notary Public, Bryan 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 acknowledgements or oaths required herein. See that all the questions are answered. If applicant cannot write she 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 More Than One Year and That She is Now a Widow.

STATE OF OKLAHOMA, COUNTY OF Bryan, ss:
 Before me A. E. Richey, a Notary Public in and for said county and state, on this 22nd day of October, 1921, personally appeared W. F. Dodd whose address is Caddo, Oklahoma, and J. A. Moore whose address is Caddo, Oklahoma, 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 15 and 15 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 22nd DAY OF October, A. D., 1921.
A. E. Richey
 Notary Public.

In and for said County and State.
 (SEAL)

W. F. Dodd
J. A. Moore
 SIGNATURES OF TWO WITNESSES

My commission expires July 23d, 1922.

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 _____, 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, 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 _____
 Statefully 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: _____
Witnesses all deceased

SUBSCRIBED AND SWORN TO BEFORE ME THIS... DAY OF _____ A.D., 19____.

In and for said County and State.
 (SEAL)

(SIGNATURES OF TWO WITNESSES)

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.

Application for Pension for Widow of Confederate Soldier or Sailor.

DO NOT WRITE BELOW THIS LINE

Martha L. Fordham

P. O. :

St., R., Bx. No. *Callahan Okla*

Filed in Pension Office *031-25-1921*

Disallowed

Allowed *NOV 25 1921* No. P. *3852*

Allowed from *Oct-1-19* Amt. \$..... Class..... per month.

Reconsidered and allowed

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

R. D. Sneed
Commissioner

THIS SPACE BELOW FOR USE OF COUNTY JUDGE ONLY.

State of Oklahoma, County of *Butler*

Filed in the office of the County Judge of said county and state this *24th* day of *Oct* 19*21*

It is hereby recommended that the within named applicant for pension be *Granted* a pension, *if found eligible by the*

Commissioner

Sam Timm
County Judge

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

N. S. OCT 25 1921

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE,

WASHINGTON, NOV. 21, 1921.

Respectfully returned to
Pension Department,

Oklahoma City,

Oklahoma.

with the information that Jacob A. Woodard
also borne as Woodward)
(not borne as Jacob Abner) pvt Co. B.

1st Battn. (Stirmans) Ark. Cav., U.S.A. en-
listed Dec. 3, 1861 at Carrol Co., Ark.

On M.R. for Jan & Feb 1863 (only roll
on file) he is shown as present, Cap-
tured at Black River Bridge May 17,
1863. Paroled until exchanged at
Point Lookout, Md., Dec. 24, 1863.

Recd at City Point, Va., Dec. 28, 1863.

No later record found.

P. C. Harris
The Adjutant General.

Per 7783.

STATE OF OKLAHOMA.
Pension Dept.

Okla. City, Okla.
OCT 25 1921

Dear Sir:

I have the honor to request the official C. S. A. record of:-

James Andrew Woodward

who claims to have served in

Co. *B*, *1st* *Batt*

Regt. of *Arkansas Cavalry*

His Captain was _____

His Major was _____

His Colonel was *R. Sturman*

Reg 3rd
Enlisted in 1861, and was

paroled, 1865,

Enlisted in Carroll Co. Ark.

Yours respectfully,

R. A. SNEED

Commissioner.

RECEIVED

OCT 28 1921

OLD RECORDS DIVN.

P-3852

Durant Okla
July 24. 1928.

Prison Department.

C. J. Stewart,

Dear sir:

I'm writing you in regard of
my Mother Mrs Martha N. Woodward
Whom has been living with me
for the last four years up until
Till July the 20 when my mother
passed away at her home here in
Durant, I am a widow with two
children and the Banker and
Undertaker both told me if I
would write you you would let
me have one more draw to pay
the funeral expenses and Dr Bill
I still owe so please let me
know if it is so as I surly feel
up against it I have to work for
a living so you see I need it
so I close

your resp^{ct} Mrs Blanche Clayton
301. W. Ark st Durant, Okla

August 2, 1928.

P-3852

Mrs. Blanche Clayton,
301 W. Ark. St.,
Durant, Oklahoma.

Dear Mrs. Clayton;

We are all so sorry to hear of your mother's death, and certainly do sympathize with you. It is a hard thing to lose one's mother.

Your mother had signed her September claim blank and the warrant will be sent to you about October 1st. You can cash it by indorsing it with her name, by yourself as daughter, having two witnesses sign it with you. It is presumed the money will be applied on funeral expenses, and we hope it will be of some benefit to you for that purpose.

Your mother has been on our roll for a long time, and we are more than sorry to close her account on our records.

With much sympathy and many kind wishes to you,
we are

Yours sincerely,

Confederate Pension Department
T. B. Hogg, Commissioner.

By

Clerk.

QUARTERLY CLAIM BLANK**STATE OF OKLAHOMA**

COMMISSIONER OF PENSIONS
 OKLAHOMA CITY, OKLAHOMA
 DEPARTMENT NO. 69

PENSION NO.

In Account with 3852

MARTHA N WOODWARD

P. O. Address

309 S 3RD

DURANT OKLA

Filed -----

Amt. ClaimedFor quarter ending ----- **DEC 31 1928** -----**\$75.00***2 Accused*

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. -----

 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

----- Address -----

----- Address -----

DATE, SIGN AND RETURN AT ONCE