

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 Burtcham ss:
 Before me E. G. McComas in and for said county and state, on this 30th
 day of January 1920, personally appeared O. N. Wiedler whose ad-
 dress is Sayre, Oklahoma, and J. M. Lowery whose address
 is Sayre, 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 ap-
 plication 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 12 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 30th DAY OF January
 A. D., 1920 } E. G. McComas
County Judge }
 In and for said County and State }
 (SEAL) } My commission expires 19
O. N. Wiedler
J. M. Lowery
 [SIGNATURES OF TWO WITNESSES]

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 _____ [Give his full name] _____ 18 until _____ 18 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 _____ 18 at _____ by reason of _____
 [State fully why and by what method—honorably 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 _____ 18
 until _____ 18 .
 _____, affiant last above named, states that he served in Company _____
 of _____ Regiment of _____ from _____ 18
 until _____ 18 .
 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) } My commission expires 19
 [SIGNATURES OF TWO WITNESSES]

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 4158
 Application for Pension for Widow of Confederate Soldier or Sailor
 DO NOT WRITE BELOW THIS LINE
 P. O. Mary M. Whitcomb
Sayre Okla
 St., R., Bx. No. _____
 Filed in Pension Office FEB 2 1920
 Disallowed _____
 Allowed Feb 11, 1920 No. P 3281
 Allowed from Aug-1-11 Amt. \$ _____ per month.
 Reconsidered _____ and _____ allowed
 From _____ Amt. \$ _____ No. P _____
 THIS SPACE BELOW FOR USE OF COUNTY JUDGE ONLY
 State of Oklahoma, County of Burtcham
 filed in the office of the County Judge of said county and state this 30th day of January 1920
 It is hereby recommended that the within named applicant for pension be granted a pension.
 [Granted—returned]
E. G. McComas
 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.
 MCS FEB 2 1920

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 Beckham, 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? Mary M. Whitehurst
[Give your first name, your middle initial, and your surname.]
- 2 What is your post office address? Sayre, Okla
- 3 What is your street, route or box number? _____
- 4 Are you an actual resident of the State of Oklahoma? Yes Of what county? Beckham
- 5 How long have you lived in the State of Oklahoma? 16 years
- 6 Where were you born? Jefferson Co, Florida 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 other means of support, from any source whatever? No If so, state in detail the source and amount thereof. _____
[Yes or no.]
- 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? Yes If so, state fully the amount, value and circumstances. House and two lots for \$850.00
[Yes or no.]

13 Have you a home of your own? No If not, with whom do you live? W.H. Whitehurst, Sayre, Okla

14 If related to the person you live with, state what relation. My son

15 Have you any relatives or connections whose natural duty it is to provide for you? (State fully) Yes - my son

16 What is your physical condition? Not good 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? Martin Spark Whitehurst

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? Feb 28th - 1867 Where? Jefferson Co, Florida

24 When did he die? Dec 31st - 1915 Where? Sayre, 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? Artillery

27 In what state was his command organized or from what state did he enlist? Florida

28 When did he enlist? 1862 Where? Florida How long did he serve? about 3 yrs

29 What was the name or letter of his company, battery or ship? Capt C. E. Dyke's Company

30 State the name and number of his regiment or battalion. Florida Light Artillery

31 To what other commands if any was he ever transferred? Don't know

32 If possible, state the names and rank of his officers. Capt C. E. Dyke's

33 How was he released from the Confederate service? (Captured, paroled or honorably discharged.) Paroled or Discharged
Why? End of war
When? 1865 Where? Andersonville Ga.

34 Was he a commissioned officer? No 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? Yes State fully. only a guard at Andersonville Prison in Georgia

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 loving 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
Mary M. Comas
Mary Woods

Mary M. Whitehurst
[Applicant sign here, first name, middle initial and surname]
Subscribed and sworn to before me this 30th day of January A.D., 1920
E. G. McComas - County Judge
[Signature and title of officer]
Beckham County, Oklahoma

My commission expires _____ 191____
(SEAL)

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.

4138

J. D. St

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE,

WASHINGTON, Feb. 7, 1920.

Respectfully returned to

Pension Commissioner
State of Oklahoma
Oklahoma City

with the information that

M. S. Whitehurst, Pvt.
Capt. Dyke's Co. 4 La.
Light Artillery C.S.A.
enlisted April 27, 1863,
appears on roll for Nov.
and Dec. 1864, last
on file, as present, and
on prisoner of war re-
cord, as paroled at
Madison, Fla. May
15, 1865. Name not
found as Martin S.
Whitehurst.

McLain

The Adjutant General.

Per *f*

Office Of
THE PENSION COMMISSIONER
STATE OF OKLAHOMA

Oklahoma City, FEB 2 1920

No. A. _____

Hon. Adjutant General,
War Department,
Washington, D. C.

Dear Sir:--

For the purpose of determining the merits of a certain petition for pension to be granted by the State of Oklahoma, you are respectfully requested to furnish the military record of the following named soldier, who is said to have served in the Confederate States Army (or Navy):-

Name:-- *Martin S. Whitehurst*

Company: *Capt C. E. Dyke's Company
of Florida Light Artillery
Enlisted 1862 Paroled 1865*

Respectfully,

R. T. Green

COMMISSIONER OF PENSIONS

3 Received A. G. O. FEB 6 1920

4138

State of Florida,
S. S.
Jefferson County.

Before me the undersigned authority personally appeared D. J. Hamrick, of Aucilla, Florida, to me well known, and who being by me first duly sworn deposes and says: that he was a soldier in the Civil War of the War Between the States, and that he was a comrade of M. S. Whitehurst, and that he knows the said M. S. Whitehurst did actually serve in said war in Captain C. E. Dyke's Company of the Florida Light Artillery; ; and he further deposing says that he knows the said M. S. Whitehurst enlisted in said Company about the year A. D. 1862, and served until about the month of May A. D. 1865, when he was honorably discharged, or paroled, on account of the close of the war.

D. J. Hamrick

Sworn to and subscribed before me this
19th. day of January, A. D. 1920

D. J. Hamrick
Notary Public State of Florida at large.
My Commission expires February, 29th. 1920.

COMMISSIONER OF PENSIONS
OKLAHOMA CITY, OKLAHOMA
DEPARTMENT NO. 69

DEC 14 1921

Filed.....

STATE OF OKLAHOMA

In Account with

MARY M. WHITEHURST.

P. O. Address

SAYRE, B-223, 4th ST.

To Pension No... 3281.....

For the quarter ending..... DEC 31 1921.....

Class.....

Amt. Claimed

30 00

The State Auditor is hereby authorized to deliver warrant issued in payment of this claim to the Commissioner of Pensions, and he 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.

PENSIONER MUST SIGN NAME EXACTLY AS IT IS WRITTEN ABOVE, USING INK

GIVE YOUR PERMANENT ADDRESS:

P. O. Sayre Oklahoma.....

Route..... Box.....

St. No.

Pensioner sign name 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

Kate Whitehurst Address... 1234 W 32 St
Rebecca Whitehurst Address... Okla City

Date, Sign and Return this Claim at Once.