

Box # 46607

Cont. 322920

Fleter Yann

Widow of
Moses Yann ^{miss}
Samuel Bogn

31.0. 222. 920

Mo. 22nd 1899
Peter Yann
WIDOW OF
Moses Yann alias Samuel Broggs
Rank. Ph. Co. Y.
Regt. 38th Inf. Vol. Inf.
Knoxville Agency.
Rate per Month \$ 8⁰⁰
Commencing Nov. 1st, 1899.

Additional sum of \$2 per month for each of the following children, until arriving at the age of 16 years, commencing Nov 1st. 1899.

Amnion 10 yrs. " Aug 20 1881 1881

18

✓ 6. 18
6. 18

18

Issued Nov 16, 1801.
Mailed " 20 " 1801.

Fee, \$10...

WORKERSSED TO \$40 PER MONTH FROM
JUNE 4, 1928 - ACT MAY 23, 1923

13-216.1
OCT 5 1890
3805

Ex'r.

INVALID.

No.

1029

Acts of July 14, 1862, and March 3, 1873.

Mo. Apr 21 190. 5
Tenn & G. will trust
W. Va. Court-Cir 3079

alias Moses Wann
Samuel Boggs

P. O. Winton
Hertford Co. N.C.
Service: Art. G-38-U.S.C. Inf.

Enlisted: Aug 16, 1864.

Discharged: Jan. 23, 1867.

Application filed: Mar. 24, 1891.

Alleges: Pleur. & res. rheum,
Dec 64

Re-enlisted: 1/5
N

Attorney: J. W. Flennier

P. O. Washington
D.C.

Recognized. T.Y. Contract.

Cert. of Dis. Searched for
(17176-2-000.)

, 18 .
ans

N. C.

S. C.

FLA.

GA.

ALA.

MISS.

EX.

TEX.

KY.

TENN.

MO.

ARK.

D. C.

U.S.C.T.

No.

ans

Hansberger

[3-216 a.]

~~Days~~ Ex'r.

No. 763029

Act of June 27, 1890.

~~alias~~ ~~Moses~~ ~~Frank~~
~~Samuel~~ Bogg's
P. O. Winter

% A. J. Bawley A. b.
Service: G. 38. U. S. Inf.

Enlisted: , 18 .

Discharged: , 18 .

Application filed: July 29 , 1890

Alleges: .

Any other Claim filed: 763029

Numerical No. 244082

Attorney: J. W. Glancey

P. O. Washington D. C.

Recognized.

Contract.

Cert. of Dis. Searched for

18

Not Oct 27-90. S
Jan 5-1891 Ex Ba Hampton NC
MD.

V.A.

W. V.A.

N. C.

S. C.

FLA.

GA.

ALA.

MISS.

LA.

TEX.

KY.

TENN.

MO.

ARK.

D. C.

U.S.C.T.

Mo.

REIMBURSEMENT

Certificate No. _____

Pensioner _____ *A. P.*

Class _____

Date of Death _____

Claimant _____

Post Office _____

Received _____, 192 _____

Act of June 27, 1890.

INVALID. Series

Cert. No. 563805

Name, Samuel Boggs.

Rank, Pri; Service, C. & Inf't. C. & Inf't. U.S.

Original Roll: Knoxville

Agency. Transf'd., 18, to

" 18, to

Issued

Apr. 22, 1891

Mailed

Mar. 11, 1891

Rate and Period

10, from July 29, 1891

Deductions:

Disability: Dis. of heart.

Issued

DEAD, 18

Mailed

Rate and Period, \$

, from 18

Deductions:

Disability:

Issued, 18

Mailed, 18

Rate and Period, \$, from 18

Issue, Class

Entered

Deductions:

Disability:

Issued

Mailed

Rate and Period, \$, from 18

Entered

Deductions:

Accrued - Pension Certificate and
other issued Nov. 26, 1901

Disability:

Nov. 20, 1901

INDORSEMENTS.

DROPPED

Dec. 31, 1900
Death J.M.C.

See Wid. of 522.920

Oct. 18 '99 F

See Accrued.

[3-218 a.]

Newburgh Ex'r.

Wid. O. No. 705. 637

6/37 Act of June 27, 1890.

W. W. 22 17 W
Nov. 28/99. A. S. Nat.

MD. Auditor for report.

Atty. Wills for identity, ~~debt~~ &
Property statement, dependency,
Assessment, prior marriage, no
W. V. A.

divorce, widowhood, birth, in

Fleter Ann
Winton, Bertford Co. N.C.

~~alias~~ Moses Widow
~~alias~~ Samuel Ann
~~alias Moses~~ Widow
G 38 U. S. C. Inf.

Died at

Sep - 6 - 1899

No other claim. than

Wid. O - 705. 637

Inv. est. 5-63. 805-7

Nov. 22, 1899.

d.c.c.

Clerk.

Numerical No.

N. C. Feb. 9, 1900. A. G. verify Comr.

S. C. April 3, 1900. A. G. verify Comr.

FLA.

GA.

ALA.

MISS.

LA.

TEX.

KY.

TENN.

MO.

ARK.

D. C.

U.S.C.T.

Application filed: Nov. 15, 1899.

Attorney: W. H. Wills

P.O.

Wash.

D. C.

No.

O.

Attorney Filed.

See Decrees.

Newburgh [3-218.]

Ex'r.

4/138

No. 705637

Acts of July 14, 1862, and March 3, 1873.

Recd Oct-4-1899
Oct. 24/99. Atty Wills for origin, continu-
MD. ~~date & cause of death, marriage, no prior~~
~~marriage, no divorce, widowhood,~~
~~birth, ch. living.~~ L. W.

Elter ~~Boggs~~ ^{Vann}

Winton. D. C.

alias ~~Moses~~ ^{Widow} ~~Vann~~

Samuel Boggs

8. 38. U. S. W. Inf.

Died at

Aug. 6. 1899

No other claim than

Inv Est 563.805

ABANDONED.

Oct 2, 1899

H. P. M.

Clerk.

Application filed: Sept 23, 1899.

Attorney: W. H. Wills

P. O. Washington
D. C.

312. Ind. Ave.

N. C.

S. C.

FLA.

GA.

ALA.

MISS.

LA.

TEX.

KY.

TENN.

MO.

ARK.

D. C.

U.S.C.T.

No.

CLAIMANT'S TESTIMONY.

State of North Carolina, County of Hertford, ss:

In the matter of the application for Orig. Inves. Pension No 25-879
of Samuel Bogg, personally comes the claimant, who, being

first sworn on oath, says That he is unable to furnish the affidavits
of his Commissioned Officers in the above named
case for the reason that he does not recollect the
names of any of his Commissioned Officers and he does
not know whether they are living or dead and if
living he does not know of their whereabouts
or their Post Office address. Claimant further
states that he is unable to furnish the affidavits
of his ^{1st} Lieutenants because they are dead, having recently
died in the City of Norfolk, Va., his name
was Abraham Woodhouse, an officer is informed
and believes, the name of one was Abraham Wood-
house, who died in the city of Norfolk, Va.,
another one was named Tasco Holmes,
who died at Virginia Beach, Va., affiant
does not recollect the names of others, if there
was others.

My Post-Office address is Winton

County of Hertford State of North Carolina

Geo. Cooper

A. J. Beverly
Two witnesses if claimant signs by mark.

Samuel X. Bogg

Claimant's Signature.

mark

Subscribed and sworn to before me this 19th day of May 1891. The affiant is
the person he represents himself to be, and a credible witness. I certify that I read said affidavit to said
affiant and acquainted him with its contents before he executed the same. I am not interested in this
claim. Witness my hand and seal the day and year above written.

*Erasures & interlineations made before
signing & sealing & before officer executed affidavit, P. B. Rich
mality to give an n. P.*

STATE OF.....

COUNTY OF.....

SS.

I HEREBY CERTIFY that before whom the foregoing affidavit was made, was at the execution thereof a in and for the County of and State of duly authorized to administer oaths, and that his signature thereto is genuine.

Official Signature.

Put
here. { your
[initials]



CLAIMANT'S TESTIMONY.

John B. Boggs
"G" 38" 26 S.C.

FOR

Or' Lnd, Pension

NO. 287879

RECORD

JUN 24 1891

RECEIVED

FILED BY

J. W. FLENNER,

ATTORNEY,

WASHINGTON, D. C.

For Officer's or Comrade's Testimony.

Officer's, Surgeon's or Comrade's Post-Office address.

I, Joshua Newson, a resident of Wyoⁿ,
in the county of Hertford, State of N.C.,
late Second of company "G", of the 38th Regiment, infantry,
on oath, depose and say, that I was well acquainted with Samuel Boggs,
late a Private, in company "G", of the 38th Regiment,
of the war of 1861: that at the time of his enlistment, said Samuel Boggs,
was a sound & healthy man.

and while in the military service of the United States in the line of his duty, and without fault or improper conduct of his own, on or about the during the Fall of 1864, at Chaffins Farm,
in the state of Virginia, contracted rheumatism in both
knees & ankles.

State time and place of disability, and if by wound in battle, state name of battle; if by accident, state the circumstances; and if by sickness, state the cause and nature of the disease.

State your source of information.

I know these facts from having been with claimant oh time
& having seen him often & complain and I have no interest whatever in the prosecution of this claim for pension.

W. H. Smith

A. T. Beverly
Two witnesses when signed by mark.

Joshua Newson
Affiant's Signature.

mark

Sworn to and subscribed before me this 8th day of November, 1890

at Winton in the county of Hertford

State of N.C. I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of full credit as a witness, and that the contents of this affidavit were made known to him before executing.

P. B. Peck M.D.
Official Signature.

STATE OF COUNTY OF SS: M. J. 1890

I HEREBY CERTIFY that before whom the foregoing affidavit was made, was at the execution thereof a in and for the County of and State of duly authorized to administer oaths, and that his signature thereto is genuine.

Official Signature.

Put
your
hand
on
the
seal



OFFICER'S OR COMRADE'S
TESTIMONY.

IN CLAIM OF

FOR

NO.

FILED BY

J. W. FLENNER,

ATTORNEY,

WASHINGTON, D. C.

For Officer's or Comrade's Testimony.

Officer's, Surgeon's or Comrade's Post-Office address.

I, Joshua Newcome, a resident of the vicinity of Winton, in the county of Hertford, State of N.C., late Sergt. of company "G" of the 38th Regiment N.S.C. Inf., on oath, depose and say, that I was well acquainted with Daniel Bogg, late a Private in company "G" of the 38th Regiment N.S.C. Inf., of the war of 1861; that at the time of his enlistment, said Daniel Bogg was a round and able bodied man.

Here state condition of soldier's health at time of enlistment.

and while in the military service of the United States in the line of his duty, and without fault or improper conduct of

his own, on or about the winter day of 1864, at Chafin's Farm,

in the state of Virginia he contracted acute pain in left side & rheumatism in right arm, caused by exposure to the cold & inclement weather & hardships due to a soldier's life, soldier having lain out in the cold & inclement weather during most of winter 1864,

State time and place of disability, and if by wound in battle; state name of battle; if by accident, state the circumstances; and if by sickness, state the cause and nature of the disease.

State your source of information.

I know these facts from being a member of some Co. & Reg. during and I have no interest whatever in the prosecution of this claim for pension.

A. T. Beverly

Charles W. Peckill

Two witnesses when signed by mark.

Sworn to and subscribed before me this 30th day of May 1891

at Winton

in the county of Hertford

State of N.C.

I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of full credit as a witness, and that the contents of this affidavit were made known to him before executing.

Official Signature.

O. Rhema

PRO. Rec'd. 1891

OFFICER'S OR COMRADE'S TESTIMONY.

IN CLAIM OF

Cham. Bogg's.
L. 38th Ave. S.

FOR

Original

NO. 163. 029.



FILED BY

J. W. FLANNER,

ATTORNEY,

WASHINGTON, D. C.

Official signature.

in mind for the County of

I HEBERREBY CERTIFY that before whom the foregoing is

10 JULY 2002

HOHLLS

RECORD & PENSION OFFICE
No 1875213
WAR DEPARTMENT

3-061.

South Div.
L. N., Ex'r.
Mid. Div., No. 705637
Moses Name
alias Samuel Brooks
L. 38 N. S. L. Inf.

Record and Pension Office,

WAR DEPARTMENT.

Respectfully returned to the

Commissioner of Pensions.

The rolls show that

Joshua Name

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., Feb. 1, 1900

SIR:

For use in the above-entitled claim for pension
please furnish a report from the records of your
office as to the presence or absence on or about
January 1865 and
of *Joshua Name*

Div. L 38 N. S. L. Inf.

named in the above inquiry ~~now~~ present
during the period mentioned except as follows:
Oct. 31 to Oct. 31 65-66
Art. Acad. Conf. 1 Div. 25
66



The station of the
during said period was as follows:

and the station at that time of the

By authority of the Secretary of War:

John T. Gandy

Colonel U. S. Army, Chief of Office.

The CHIEF OF THE
RECORD AND PENSION OFFICE,
WAR DEPARTMENT.

Very respectfully,
John T. Gandy
SOUTH DIV.
FEB 12 1900
RECEIVED.

Commissioner.

Per *me*

Washington, D. C.,

189

For Officer's or Comrade's Testimony.

Officer's, Surgeon's or Comrade's Post-Office address.

I, John Kellring, a resident of Rockley,
in the county of Norfolk, State of Virginia,
late Private of company "G", of the 38th Regiment U.S.C.T.,
on oath, depose and say, that I was well acquainted with Samuel Bogg,
late a Private in company "G", of the 38th Regiment U.S.C.T.,
of the war of 1861: that at the time of his enlistment, said Samuel Bogg,
was a sound and able bodied man at the time of his enlistment.

and while in the military service of the United States in the line of his duty, and without fault or improper conduct of his own, on or about the Winter day of 1864 at Deep Bottom in the state of Virginia contracted Rheumatism and severe pain in left side, caused by exposure to the cold & inclemency of the weather, claimant having been compelled to lay out on frozen ground during the whole winter.

State time and place of disability, and if by wound in battle, state name of battle; if by accident, state the circumstances; and if by sickness, state the cause and nature of the disease.

State your source of information.

I know these facts from the fact that I was a member of some Regt. of Color and having been present with him during the winter of 1864 & I have no interest whatever in the prosecution of this claim for pension.

NOTE.

Execute this before a Clerk of Court if possible. When executed before a Notary Public or Justice of the Peace, a certificate from the Clerk of the Court should be attached certifying that the Notary or Justice had authority to act as such.

Two witnesses when signed by mark.

Sworn to and subscribed before me this 23rd day of May 1891

at my office in the county of Norfolk
State of Virginia

I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of full credit as a witness, and that the contents of this affidavit were made known to him before executing.

L. H. Scott J. P.
Official Signature

Oakhurst

STATE OF Virginia COUNTY OF Norfolk, ss:

I HEREBY CERTIFY that L. H. Scott before whom the foregoing affidavit was made, was at the execution thereof a Justice of the Peace in and for the County of Norfolk and State of Virginia duly authorized to administer oaths, and that his signature thereto is genuine.

W. H. Farmer
Official Signature.
Supt. Clerk Norfolk Co. Ct. Va.
Put your
name here.
Seal

OFFICER'S OR COMRADE'S
TESTIMONY.

IN CLAIM OF

Charles Boggs

FOR

Reg. Land Commissioner

NO 25, 879



RECORD DIV.
JUN 24 1891
RECEIVED.

J. W. FLENNER,

ATTORNEY,

WASHINGTON, D. C.

FILED BY

22 Department of the Interior,
Bureau of Pensions.

June 8, 1893.

Respectfully requested of the ADJUTANT
GENERAL U. S. a report from the records of his
Office as to the presence or absence on or about

the 1st of January, 1864
of John Keeling from
of Joshua Newache, Capt

Berkeley, Calif. to
also Nine
Holiday Inn

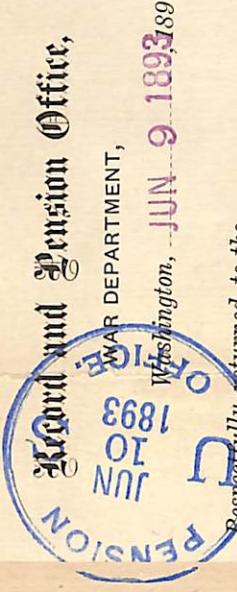
RC. 28 Regt

and the station, at that date, of the

Company

Claim No. 563705
Samuel Boggis
for
service

John Schirme
Commissioner.



Commissioner of Pensions.

The rolls show that

William Keeling
and
Joshua Newache

mentioned in the preceding endorsement were present
during the period named in that endorsement except
as follows:

Feb 28, 65 Keeling Absent on
Det. for at 1 Brig 1 Div 25
Ac since Aug 1864.
Dec 11, 65 Present Det 2d Div 25
Capt. Feb 28, 65 Absent Det
See Capt. Corp.

During the period named the station of the company
and regiment was as follows:

In the field near Petersburg
Va.

By AUTHORITY OF THE SECRETARY OF WAR:

John Schirme
Colonel, U. S. Army, Chief of Office.

John Schirme

Colonel, U. S. Army, Chief of Office.

(320)

AFFIDAVIT for NEIGHBORS' and GENERAL PURPOSE,

State of North Carolina, County of Watauga, ss.

In the matter of Invalid Pension of Sam'l Bogg,
See "G" 38 neight M.R.C.T. No. 76,3029

ON THIS 10th day of March A. D. 1891, personally appeared before me
A Notary Public, Henry Holloman, aged 51⁷ years, a resident of
near Winton, N.C. and Albert P. Beverly
aged 35⁵ years a resident of near Winton, N.C., well known to me to be reputable and entitled to credit, and who being duly sworn, declares in relation to aforesaid case as follows:

that they are near neighbors of claimant & live within two miles of him. That they have known claimant for at least 25 years & have frequently seen him & conversed with him & have often & often heard him complain of sharp pain in left side & of rheumatism in right shoulder & arm. That they know of their own knowledge that claimant has been much incapacitated to perform manual labor divers times on account of said disabilities. And that in their honest opinion claimant's disabilities are not due to any vicious habits of his own & that he is not able to perform more than $\frac{1}{2}$ the manual labor of an able bodied, sound man.

Their Post-Office address is Winton,

They further declares that they have no interest in said case, and are not concerned in its prosecution.

E. G. M. Lewis
J. B. Linton

If affiant signs by mark, Two persons who can write sign here.

Henry X. Holloman
Albert P. Beverly

Affiant's Signature.

IMPORTANT.—If testimony is given as to physical condition of claimant, it should be stated how long you have known him. If before his enlistment, was he sound and free from his present disability, and what his physical condition was when you first saw him after his discharge, what he complains of, and to what extent ($\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, $\frac{4}{4}$) or how much it has disabled him yearly during your knowledge of his case; also state how you know the facts to which you testify.

STATE OF North Carolina COUNTY OF Surry

Sworn to and subscribed before me this day by the above named affiant, and I certify that I read said affidavit to said affiant and acquainted them with its contents before they executed the same. I further certify that I am nowise interested in said case nor am I concerned in its prosecution, and said affiants are personally known to me, and that they are credible persons.

P. R. Peck
Official Signature.

[L. S.]

M. C.
Official Signature.

I Clerk of County Court in and for the said County and State, do certify that Esq., who hath signed his name to the foregoing affidavit, was at the time of so doing in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature is genuine.

Witness my hand and seal of office this day of 189

[L. S.]

Clerk of the

Note.—This should be sworn to before a CLERK OF COURT, NOTARY PUBLIC, JUSTICE OF THE PEACE. If before a JUSTICE OR NOTARY, then CLERK OF COUNTY COURT must add his certificate of character on the back thereof; and not on a separate piece of paper.

Off 563805
1st June 19

ADDITIONAL TESTIMONY.

IN CLAIM OF

Charles Bogg
Co. #1 38 M.D.C.S.

FOR

Malinda Stevenson

No. 463029



FILED BY

J. W. FLENNER,
ATTORNEY,

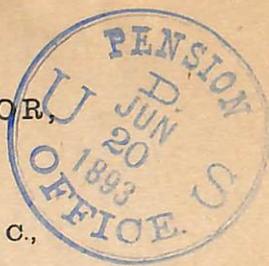
WASHINGTON D. C.

Southern
Div.
Add'l No. 563,805
Ext.
Samuel Boggs
G 38 Reg't
Co.

DEPARTMENT OF THE INTERIOR,

BUREAU OF PENSIONS,

WASHINGTON, D. C.



Return this letter with your reply.

June 8, 1893

Sir:

To further aid this Bureau in determining the merits of the above entitled claim for pension, be kind enough to answer in your own handwriting the following questions, giving more complete details than your affidavit affords.

Very respectfully,

Albert Beverly
Winton, M

Wm. L. Chapman
Commissioner.

When did you first see claimant after he returned from the army, and how do you fix the date?

Answer: The first time I saw him after his arrival was in '69 from this fact, ^{we} organize a church and known as Mt. Moriah in Feb. '69, and the of what disability did he complain, and how was he affected? ^{Claimant with a Deacon} that day.

Answer: He complain of rheumatism in one arm. Pain in left side and rheumatism pains all over him

How frequently have you seen him since your first acquaintance?

Answer: I have seen him continually ever since much as once a month.

If he has continued to suffer with such disability, please describe the symptoms which were apparent to you, and state to what extent he has been disabled for manual labor thereby during each year?

Answer: He has continued to suffer with such disability and it appears to me from his actions that he does suffer to considerable extent don't know how much each year. But I now think he has not been able ^{work} some time ^{1/2 of his time}

My means of knowing the facts of the case are these: I live in 1 1/2 miles to 1 1/4 miles for 20 years and now think he was about 50, or could not cultivate his crop because he was not able and I and several of my neighbors have been and help him out in his crop since then

COMMISSIONER OF PENSIONS,

Washington, D. C.

Very respectfully, for the above reason

Albert Beverly

Southam

Div.

[3-056.]

act of No. 563,805

Samuel Boggs

Co. G 38 Reg't U.S.A.

Return this letter with your reply.

DEPARTMENT OF THE INTERIOR,

BUREAU OF PENSIONS,

WASHINGTON, D. C.,



June 8, 1893

Sir:

To further aid this Bureau in determining the merits of the above entitled claim for pension, be kind enough to answer in your own handwriting the following questions, giving more complete details than your affidavit affords.

Very respectfully,

H. H. Holloman
Winton W.

John Lockwood
Commissioner.

When did you first see claimant after he returned from the army, and how do you fix the date?

Answer: I saw him on his arrival from the Army
26 years ago. Come to farm on which I live

Of what disability did he complain, and how was he affected?

Answer: He complained of rheumatism. Pains
all over him.

How frequently have you seen him since your first acquaintance?

Answer: Have seen him continually ever since and knew him before

If he has continued to suffer with such disability, please describe the symptoms which were
apparent to you, and state to what extent he has been disabled for manual labor thereby during
each year?

Answer: He has continued to suffer with such disability
and it appears to me from his actions that he
does suffer to considerable extent.

Not able to work more than 1/2 of his time.

My means of knowing the facts of the case are these: I have called upon
him to hire and do favors for me and he
would refuse saying he was not able to work.
And neglected to cultivate his crop because he was not able

COMMISSIONER OF PENSIONS,

Washington, D. C.

Very respectfully,

Henry Holloman
Good

MEDICAL TESTIMONY.

Doctor's name
and
Post-Office
address.

State of North Carolina County of Hanford, ss:
County of Hanford whose Post Office address is Murphy
County of Hanford State of N. C.
and whose age is now 37 years, being first duly sworn, says that he is a regular practicing physician of 10 years standing, and that he gave medical advice and treatment to Samuel Boggs
late a _____ of Company _____ of the _____ Regiment of _____
Vols., as follows:

DIRECTIONS.

DOCTOR: Please state when (the year at least) you first treated the soldier, what you treated him for and how many years thereafter you continued to treat him and give him medical advice, giving a full medical history of his disease and its progress, whether he has grown better or any worse. If at all possible, give date and duration of all treatment administered; your books will help you. If the case appears to have been one of long standing, and chronic, say so, if his disease has been aggravated by in-temperate or other bad habits, so state. If you have treated him for more than one disease, please follow these instructions for each and particularly, doctor, give your opinion as to the degree or extent (1, 1/2, etc.) to which he has been disabled for labor during your knowledge of his case.

During the year 1887 I visited and doctored the above named soldier & was treated by me for two weeks. He was suffering from pleurisy at that time. I suppose he has gotten well as I have not heard from him since in regard to it.

It might have of long duration as he suffered much from the nervous system on that side and seemed to affect his shoulder & arm. I believe his habits are good ^{but} better than the majority of his race. I do not know to what extent he is disabled to do work as I have seen very little of him since his sickness.

I further swear that I am not interested in this claim for pension.

W. H. Scars M.D.
Affiant's Signature.

Treated in 1887

If ever in service, give rank.

STATE OF North Carolina, COUNTY OF Hertford, SS:

Sworn to and subscribed before me this 2 day of March 1891, by the above named affiant; and I certify that said affiant is the person he represents himself to be, and is a physician, in good standing and a credible witness.

I further certify that I am nowise interested in said case, nor am I concerned in its prosecution.

Robert Holloman, Jr.
Official Signature.

[L. S.]

Official Character

I..... Clerk of the County Court in and for aforesaid County and State, do certify that..... Esq., who hath signed his name to the foregoing affidavit, was at the time of so doing..... in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereto is genuine.

Witness my hand and seal of office this..... day of..... 189.....

[L. S.]

Clerk of the.....

NOTE.—This should be sworn to before a CLERK OF COURT, NOTARY PUBLIC, JUSTICE OF THE PEACE. If before a JUSTICE OR NOTARY, then CLERK OF COUNTY COURT must add his certificate of character on the back thereof, unless said Notary or Squire already has such a certificate on file in the Pension Office, showing official capacity. If such a certificate is on file, the Notary or Squire must say so in his Jurat.



MEDICAL TESTIMONY.

IN CLAIM OF

Chamuel Babb
Co. L, 38 U. S. C. V.

For

General Pension

No. 763, 29

FILED BY

J. W. FLENNER,

ATTORNEY,

WASHINGTON, D. C.

Act of June 27, 1890

(3-III.)

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

Original

Pension Claim No.

763,029

[State above whether for original, increase, or restoration.]

Name and rank of claimant.

Samuel Boggs

Rank, Private

Claimant's post-office address.

Company G, 38 Reg't U. S. C. T.
Winton Hertford Co. N.C.

Hampton Va

State,

[Post-office address of the Board]

February 26th

1891.

[Date of examination.]

Cause of disability.

We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz: Pleurisy and rheumatism.

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of

dollars per month.

He makes the following statement upon which he bases his claim for

Original

[Original, increase, restoration, &c.]

That in the winter of 1864 he had pleurisy in left side
and that he has a constant pain in left side.
That he has rheumatism in left arm.

Here give the claimant's statement as briefly and as compactly as possible.

Upon examination we find the following objective conditions: Pulse rate, 100; respiration, 20; temperature, ; height, 5 feet 6 inches; weight, 140 pounds; age, 49 years. No structural change found in any joint, muscle or tendon. All joints move freely and without any evidence of pain. Steps & sits with out difficulty.

Heart. Action rapid & irregular. Pulse, after undressing, 144. Normal in size & position. Short, rough, systolic murmur at apex.

Lungs. No dulness on percussion. Good vesicular murmur over both lungs. No friction or other rales. No contraction of thorax, & respiration equal.

No other disability found.

Here give a full description of the disabilities, in accordance with pars. 5, 6, 51, 52, &c., of Book of Instructions for 1889

Rate for EACH cause of disability.

He is, in our opinion, entitled to a 12/18 rating for the disability caused by Heart Disease, for that caused by , and for that caused by .

Pha Yeldar, Pres. *S. K. Towle*, Sec'y. *J. T. Battelle*, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.

SURGEON'S CERTIFICATE

IN CASE OF

Samuel Boggs

Co. 2, 38 Reg't U. S. C. I.

Applicant for Original

No. 763,029

DATE OF EXAMINATION:

February 26th, 1891.

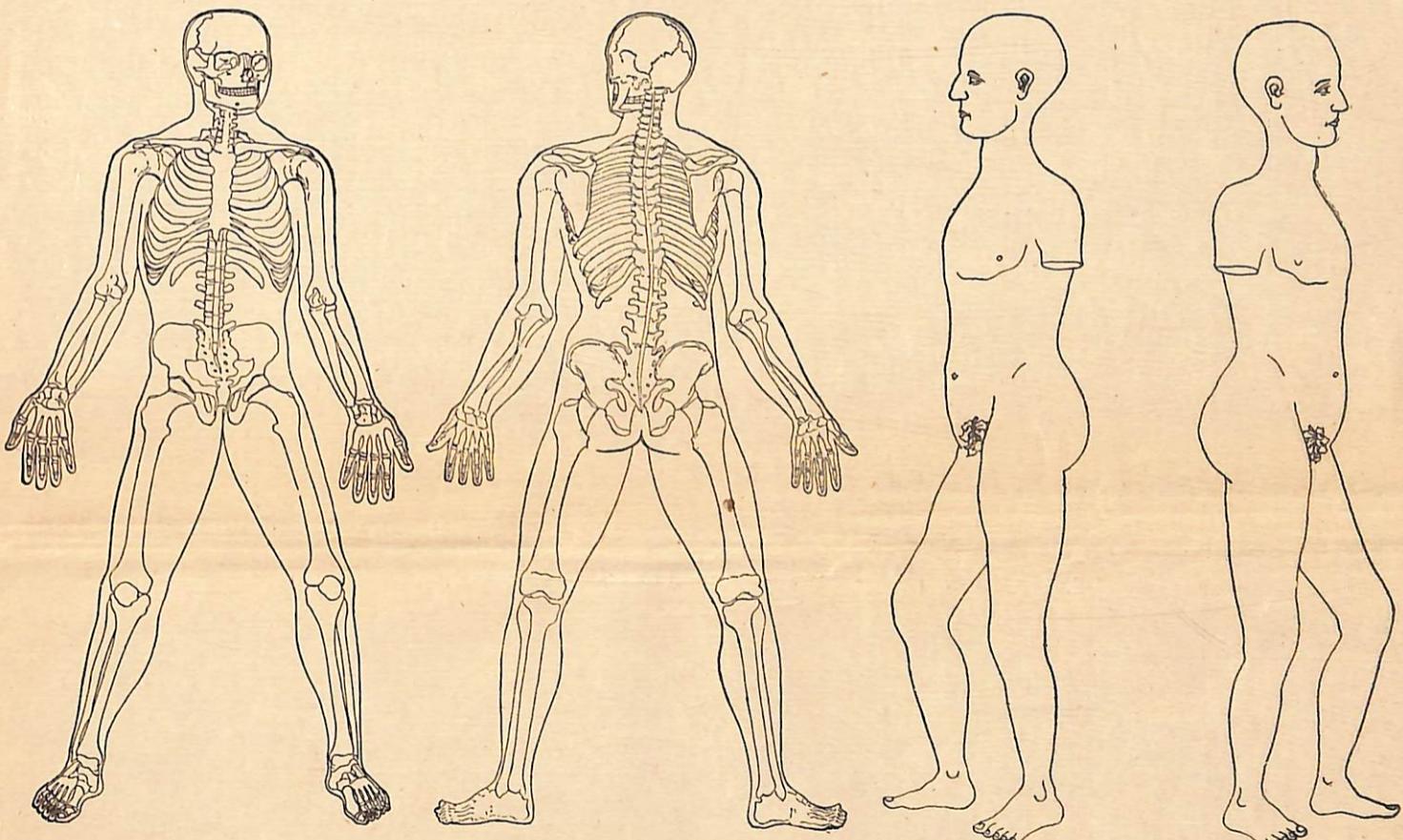
M. H. Maffedore, Pres.,
S. H. Gould, Sec'y, } BOARD.
J. H. Bentle, Treas., }

Post office, Math. M. Stone

County, Elizabeth City
Virginia

State,

P. S.—Write your Post-office address plainly and in full.



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

Increase

Pension Claim No. 863808

[State above whether for original, increase, or restoration.]

Name and rank of claimant.

Sam'l. Bogg

, Rank, Rivale

Claimant's post-office address.

Company G, Reg't U.S. C. C. Inf.

Hampton Va.

State,

Winton, Hertford Co. N.C.

hause. 6

1893

[Post-office address of the Board.]

[Date of examination.]

Cause of disability.

in the service, viz: hives of heart. Pleurisy

& resulting rheumatism

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of Twelve (12) dollars per month.

He makes the following statement upon which he bases his claim for

Increase

[Original, increase, restoration, &c.]

"Chronic complaint, rising in left side"
which he has had for twenty-nine years.
Has rheumatism mostly in right shoulder
but it sometimes works to the left shoulder

Upon examination we find the following objective conditions: Pulse rate, 84; respiration, 17; temperature, 98; height, 5 feet 6 inches; weight, 140 pounds; age, 57 years.

Here give a full description of the disabilities, in accordance with Book of Instructions.

Hives of Heart. Area of cardiac dulness normal. Apx impulse 1/2 inch below & within left nipple, apparent on palpation. All the cardiac sounds normal & regular.

Pulse rate sitting 84. After undressing & standing only 82.

Heart entirely free from disease.

He has never complained at time of intercostal neuralgia which he calls heart disease, & pleurisy

Pleurisy. No evidence whatever of pleurisy. Lungs entirely free from disease.

Rheumatism. All the joints movable & free from pain tenderness & swelling. No evidence of rheumatism.

Claimant is a muscular well developed man, & in perfect health.

Able to do any kind of manual labor & states that he does farm work.

He is, in our opinion, entitled to a

Rate for EACH cause of disability.

rating for the disability caused by

for that caused

by _____, and

for that caused by _____

J. H. Peek, Pres. Markham, Chowan, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.



SURGEON'S CERTIFICATE

IN CASE OF

Sam'l. Roff
Co. F., 3d Reg't. U. S. C. V. Inf.

Applicant for Increase

No. 363805

DATE OF EXAMINATION:

Decem. 6, 1893
J. H. Peers, Pres.,
J. A. Shewey, Sec'y,
John W. Jones, Treas.,
BOARD.

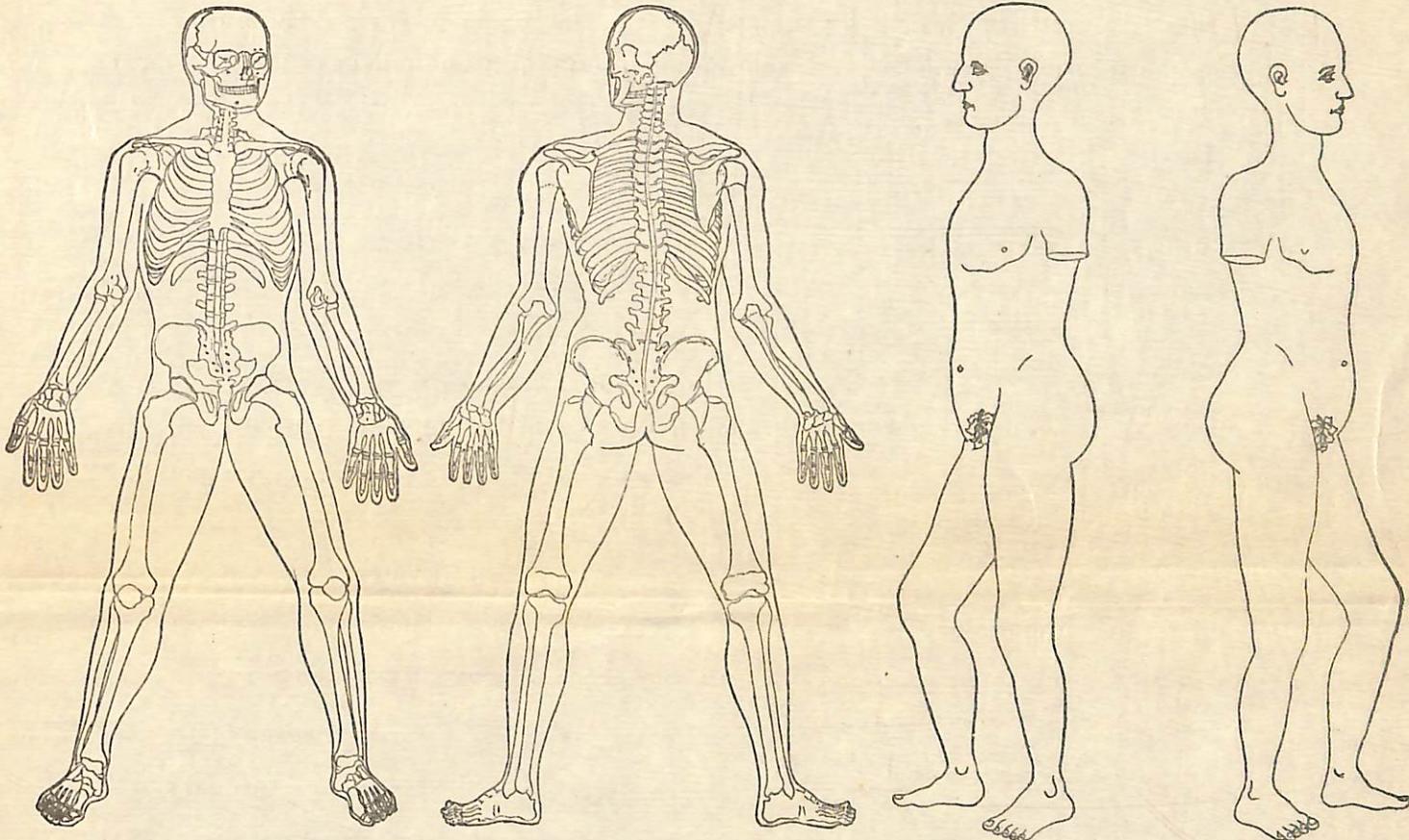
Post office, Haupthaus

County, Elizabeth City

State, Virginia

P. S.—Write your Post-office address plainly and in full.

Peers



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

CLAIMANT'S TESTIMONY.

State of North Carolina, County of Hertford, ss:

In the matter of the application for Frank Bogg Pension No 763029

of personally comes the claimant, who, being

first sworn on oath, says, That his rank of Private he has
discharge from the service of the U.S. has been Master M.
~~He is about three years & about his past office~~
~~and he has been Master M.~~
~~He has never been charged at all, That his occupation~~
~~ever since discharge has been that of a Farmer~~
~~That he was first troubled with a pain in his left side~~
~~at Deep Bottom or the fine farm, Va., in the winter~~
~~of 1864. That it first began by causing me to feel a dull,~~
~~aching pain in left side, it has continued ever since &~~
~~at times when I am at work it feels as if I was~~
~~and visible, and surrounded by sharp, stinging punc-~~
~~tions, it has continued to grow worse, I cannot lay~~
~~on my left side at night at all, if I do I am greatly~~
~~inconvenienced in my work on the following day, at~~
~~present, aching feeling follows, That when I have not~~
~~been compelled to stop with work entirely at any time,~~
~~except once during the month of Feb 1887, when~~
~~he was entirely disabled to labor at all, But that he is~~
~~not able to do hard & laborious labor at any time - he can perform~~
~~some light work~~

My Post-Office address is Wrightsville

County of Hertford State of N.C.

Frank Bogg
Claimant's Signature.
mark

Two Witnesses if claimant signs by mark.

Subscribed and sworn to before me this 31st day of January, 1887. The affiant is the person he represents himself to be, and a credible witness. I certify that I read said affidavit to said affiant and acquainted him with its contents before he executed the same. I am not interested in this claim. Witness my hand and seal the day and year above written.

Res & dis statement

P. B. Pickard

STATE OF , COUNTY OF , SS:

I HEREBY CERTIFY that before whom the foregoing affidavit was made, was at the execution thereof a in and for the County of and State of duly authorized to administer oaths, and that his signature thereto is genuine.

..... Official Signature.

CLAIMANT'S TESTIMONY.

CLAIM OF

Sam Bogg
Col. 38 U. S. C. S.

FOR

Envali P. Penman

No. 763025



FILED BY

J. W. FILENNER,
ATTORNEY,

WASHINGTON, D. C.

Claimant's Testimony
~~AFFIDAVIT for NEIGHBORS' and GENERAL PURPOSE,~~

State of North Carolina County of Westmoreland ss:

In the matter of Samuel Boffo for pension, and
763029

ON THIS 31st day of January A. D. 1891, personally appeared before me
Samuel Boffo aged 49 years, a resident of
near Winton N.C., and
aged years a resident of

well known to me to be reputable and entitled to credit, and who being duly sworn, declares in relation to aforesaid case as follows:

That he has received no medical treatment
since his discharge except the following: Dr
W. Alders of Union, Westmoreland County, N.C.
treated him for pain in left side during Feb 1887,
Claimant says further that in addition to pain in left
side he is much troubled with rheumatism in
right shoulder & upper arm, which greatly incapacitates
him to perform manual labor, that said disease
had its origin while claimant was a soldier in the
service of the U.S. & has continued ever since

His Post Office address is Winton N.C.

He further declares that he has no interest in said case, and is
not concerned in its prosecution.

A. T. Reiley
Howard

If claimant signs by mark, two persons who can write sign here.

Samuel Boffo
Claimant's Signature
mark

IMPORTANT.—If testimony is given as to physical condition of claimant, it should be stated how long you have known him. If before his enlistment, was he sound and free from his present disability, and what his physical condition was when you first saw him after his discharge, what he complains of, and to what extent ($\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, $\frac{1}{3}$) or how much it has disabled him yearly during your knowledge of his case; also state how you know the facts to which you testify.

Had no medical treatment since discharge

STATE OF North Carolina) COUNTY OF Surfside

Sworn to and subscribed before me this day by the above named affiant; and I certify that I read said affidavit to said affiant and acquainted him with its contents before he executed the same. I further certify that I am nowise interested in said case, nor am I concerned in its prosecution, and said affiant is personally known to me, and that he is a credible persons.

P. B. Pick
Official Signature

M. P.
Official Character

[L. S.]

I..... Clerk of County Court in and for the said County and State, do certify that..... Esq., who hath signed his name to the foregoing affidavit, was at the time of so doing..... in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature is genuine.

Witness my hand and seal of office this..... day of..... 18.....

[L. S.]

Clerk of the

NOTE.—This should be sworn to before a CLERK OF COURT, NOTARY PUBLIC, JUSTICE OF THE PEACE. If before a JUSTICE OR NOTARY, then CLERK OF COUNTY COURT must add his certificate of character on the back thereof, and not on a separate piece of paper.

J. W. FLENNER,

FILED BY

WASHINGTON, D. C.

ATTORNEY,



ADDITIONAL TESTIMONY

IN CLAIM OF

James D. F. F. 38 M. D.

CLAIMANT'S TESTIMONY.

State of North Carolina, County of Winston, ss:

In the matter of the application for Samuel Bogg Pension No. 763.029 of Dearington, NC, personally comes the claimant, who, being first sworn on oath, says..... That he was never treated by any
regular medical person for rheumatism while
in the service of the United States.
Claimant further says that the reason why he was not treated as before is, because he did not regard his rheumatism at the time it was contracted as being very serious, but it has continued to grow gradually more severe since that time.

My Post-Office address is Winston
County of Winston State of NC
M. G. Smith
A. J. Beverly
Two witnesses if claimant signs by mark.



Samuel Bogg
Claimant's Signature
mark

Subscribed and sworn to before me this 8th day of November 1890 The affiant is the person he represents himself to be, and a credible witness. I certify that I read said affidavit to said affiant and acquainted him with its contents before he executed the same. I am not interested in this claim. Witness my hand and seal the day and year above written.

Never treated in P. B. Local M.

STATE OF , COUNTY OF , SS:

I HEREBY CERTIFY that before whom the foregoing affidavit was made, was at the execution thereof a in and for the County of and State of duly authorized to administer oaths, and that his signature thereto is genuine.

..... Official Signature.

CLAIMANT'S TESTIMONY.

CLAIM OF

Frank Boff
G. O. & M. S. C. Y.

FOR

Orig.

No. 763.029.

FILED BY

J. W. FILENNER,

ATTORNEY,

WASHINGTON, D. C.

Declaration for Original Invalid Pension.

State of North Carolina, County of Hertford, ss:

On this 22 day of February A. D. one thousand eight hundred and eighty ^{ninth} personally appeared before me, Clerk Superior Court within and for the County and State aforesaid, Sam'l Bogg aged 48 a resident of Winston, County of Hertford, State of N. C., who, being by me duly sworn according to law on his solemn oath, deposes as follows, to wit:

"I am the identical Sam'l Bogg, who was enrolled on the 6th day of Aug. 1864 in Company G commanded by Captain Francis Steuber of the 38th Reg't of U. S. C. Inf. Vol's. and I was honorably discharged at Indiana Ia on the 25th day of Jan., 1867.

While in the service aforesaid, and in the line of my duty, I was disabled in the manner following, to wit:

From severe exposure while at Deep Bottom Va. on or about December 1864 I contracted Pleurisy & resulting affection of left side - and "Rheumatism" from which I have suffered continuously since and on which I now claim a pension.

I have ~~never~~ been employed in the Military or Naval service of the United States otherwise than set forth above. Since leaving the service, I have resided at Winston N. C. and my occupation has been farming. Before my entry into the service aforesaid I was of good, sound physical health, being at enrollment a sound and healthy man and I am now greatly disabled from obtaining my subsistence by manual labor by reason of my disabilities above stated, received in the service of the United States; and I make this Declaration for the purpose of receiving an Original Invalid Pension of the United States. I hereby appoint and empower, with full power of substitution,

J. W. Flenner, of Washington, D. C.,

my true and lawful Attorney to prosecute my claim. My Post-office address is Winston
P. O. County of Hertford State of N. C.

Attest:
Two witnesses.

A. J. Beverly
Robert ^{his} son
W. W. Jones

W. W. Jones as to Jones

Samuel ^{his} Bogg
Claimant's Signature
mark

Also personally appeared A. T. Beverly residing
at new Hinton W. B. and Robert Jones W. residing
at Hinton persons whom I certify to be respectable and entitled to credit,
and who, being by me first duly sworn according to law, say they were present and saw Samuel B. T. Jones
the claimant, sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe,
from the appearance of said claimant and their acquaintance with him, that he is the identical person he represents
himself to be; and that they have no interest in the prosecution of this claim.

*Not up as to James
Bro. E. Evans*

A. T. Beverly
Robert Jones
~~mark~~ Signature of Witnesses.

SWORN to and Subscribed before me this 22 day of February A. D. 1890;

The contents of the foregoing Declaration were fully made known and explained to claimant
and witnesses before swearing, including the words
[SEAL.] erased, and the words added; and I have
no interest in this claim for Pension.

W. J. Gandy, Clerk
Signature.
Superior Court
Official Character.

INVALID

CLAIM FOR

Original
PENSION.

Sam'l. J. Boggs
Wtch. G. - 3d Reg't
W. C. Light, Vols.

FILED BY

J. W. FLENNER,
ATTORNEY,
WASHINGTON, D. C.

WASHINGTOM, D. C.



This form of fee contract is prescribed by the Commissioner of Pensions and approved by the Secretary of the Interior July 8, 1884 under the provisions of the Act of Congress approved July 4 1884.

TO BE EXECUTED IN DUPLICATE WITHOUT ADDITIONAL COST TO CLAIMANT.

J. W. FLENNER making no charge therefor.

ARTICLES OF AGREEMENT.

WHEREAS

Samuel J. Boggs
late a *1st Lt. 10th Inf.* in
Company *38* Regiment of *U.S. C. Inf.* Volunteers, war of
1861-65 having made application for pension under the laws of the United States:

NOW THIS AGREEMENT WITNESSETH, That for and in consideration of services done and to be done in the

premises, I hereby agree to allow my agent J. W. FLENNER, OF WASHINGTON, D. C., the fee of
Twenty five dollars, which shall include all amounts to be paid for any service in furtherance
of said claim; and said fee shall not be demanded by or payable to my said agent in whole or in part, except in case of
the granting of my pension by the Commissioner of Pensions; and then the same shall be paid to him in accordance
with the provisions of sections 4768 and 4769 of the Revised Statutes, U. S. I further certify that I have paid to the
said attorney *Two* dollars on the fee and no more, which is to be deducted from the above amount.

A. T. Beverly
John Lewis
Two Witnesses' Signature

Samuel J. Boggs
Signature of Claimant
Winton, Herford, N.C.
Post-Office address.

State of *North Carolina*, County of *Herford*, ss:

BE IT KNOWN, that on this, the *22* day of *February*, A. D. 18*90*, personally
appeared *Samuel J. Boggs* the above named, who, after having had read over to
him in the hearing and presence of the two attesting witnesses the contents of the foregoing articles
of agreement, voluntarily signed and acknowledged the same to be *his* free act and deed.

[L. S.]

Goodell & C. P. Justice of the Peace
And now to wit this *28* day of *Feb.* A. D. 18*90*. I
accept the provisions contained in the foregoing articles of agreement, and will, to the best of my ability, endeavor
faithfully to represent the interest of the claimant in the premises. I hereby certify that I have received from the
claimant above named the sum of *Nothing* dollars, and no more: *Nothing* dollars being for fee and
the sum of *Nothing* dollars for postage and other expenses. And that these agreements have been
executed in duplicate without additional cost to claimant, as required by law, in excess of the fee above named the
said agent making no charge therefor. Witness my hand the day and year written above

J. W. Flenner
Signature of Attorney.

DISTRICT OF COLUMBIA, ss:
County of Washington.

Personally came J. W. FLENNER, whom I know to be the person he represents himself to be, and who, having
signed his name to the above acceptance of agreement, acknowledged the same to be his free act and deed.

[L. S.]

G. W. Peacock
Notary Public
APPROVED FOR DOLLARS and payable to
J. W. FLENNER, of Washington, D. C., the recognized attorney.

Commissioner of Pensions.

NOTICE TO CLAIMANT.

This Contract is Permissible under the Law but not Compulsory.

READ THE FOLLOWING COPY OF THE STATUTE.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled *

SEC. 3. That section 4785 of the Revised Statutes is hereby re-enacted and amended so as to read as follows:

"SEC. 4785. No agent or attorney or other person shall demand or receive any other compensation for his services in prosecuting a claim for pension or bounty land than such as the Commissioner of Pensions shall direct to be paid to him, not exceeding \$25; nor shall such agent, attorney, or other person demand or receive such compensation, in whole or in part, until such pension or bounty land claim shall be allowed: *Provided*, That in all claims allowed since June 20, 1873, where it shall appear to the satisfaction of the Commissioner of Pensions that the fee of \$10, or any part thereof has not been paid, he shall cause the same to be deducted from the pension, and the pension agent to pay the same to the recognized attorney."

SEC. 4. That section 4786 of the Revised Statutes is hereby amended so as to read as follows:

"SEC. 4786. The agent or attorney of record in the prosecution of the case *may cause to be filed with the Commissioner of Pensions duplicate articles of agreement without additional cost to the claimant, setting forth the fee agreed upon by the parties, which agreement shall be executed in the presence of and certified by some officer competent to administer oaths. In all cases where application is made for pension or bounty land, and no agreement is filed with the Commissioner as herein provided, the fee shall be \$10 and no more.* And such articles of agreement as may hereafter be filed with the Commissioner of Pensions are not authorized, nor will they be recognized except in claims for original pensions, claims for increase of pension on account of a new disability, in claims for restoration where a pensioner's name has been or may hereafter be dropped from the pension-rolls on testimony taken by a special examiner, showing that the disability or cause of death, on account of which the pension was allowed, did not originate in the line of duty, and in cases of dependent relatives whose names have been or may hereafter be dropped from the rolls on like testimony, upon the ground of non-dependence, and in such other cases of difficulty and trouble as the Commissioner of Pensions may see fit to recognize them: *Provided*, That no greater fee than \$10 shall be demanded, received, or allowed in any claim for pension or bounty land granted by special act of Congress, nor in any claim for increase of pension on account of the increase of the disability for which the pension has been allowed: *And Provided further*, That no fee shall be demanded, received, or allowed in any claim for arrears of pensions or arrears of increase of pension allowed by any act of Congress passed subsequent to the date of the allowance of the original claims in which such arrears of pension or of increase of pension may be allowed."

And if in the adjudication of any claim for pension in which such articles of agreement have been or may hereafter be filed it shall appear that the claimant had, prior to the execution thereof, paid to the attorney any sum for his services in such claim, and the amount so paid is not stipulated therein, then every such claim shall be adjudicated in the same manner as though no article of agreement had been filed, deducting from the fee of \$10 allowed by law such sum as claimant shall show that he has paid to his said attorney.

Any agent or attorney or other person instrumental in prosecuting any claim for pension or bounty land who shall directly or indirectly contract for, demand, receive or retain any greater compensation for his services or instrumentality in prosecuting a claim for pension or bounty land than is herein provided, or for payment thereof at any other time or in any other manner than is herein provided, or who shall wrongfully withhold from a pensioner or claimant the whole or any part of the pension or claim allowed and due such pensioner or claimant, or the land-warrant issued to any such claimant, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall for every such offense be fined not exceeding \$500, or imprisoned at hard labor not exceeding two years, or both, in the discretion of the court.

APPROVED JULY 4, 1884.

FEE CONTRACT.



Daniel M. Dodge
Att'ty.
Co. G-3, 1st U.S. Cavalry.
For
Original Pension.

FILED BY

J. W. FLENNER,
ATTORNEY,

WASHINGTON, D. C.

INVALID PENSION.

Pensioner, *Daniel Boggs* ✓ REISSUE TO ALLOW UNDER "GENERAL LAW."

P. O., *Winton* Rank, *Private*

County, *Hertford* Company, *G*

State, *North Carolina* Regiment, *38 N. S. C. Vols Infy*

Rate, \$ per month, commencing

REJECTED.

Pensioned for

Name, *G.W. Fenner* RECOGNIZED ATTORNEY ✓
 P. O., *city* ✓ Fee, \$ *75*; Agent to pay.

Articles filed *March 24, 1890*

APPROVALS.

Approved for

Submitted *for my* *Apr. 24, 1894*Approved for *rejection* on ground of

no pensionable disability from
alleged pleurisy and rheumatism
since date of filing claim *pleurisy and rheumatism*
subject to approval of Med *since date of filing*.
Ref.

Metzger, Legal Reviewer.
Apr. 26, 1894, Re-Reviewer.

Rayburn, *J. Morris*, Med. Reviewer.
May 5, 1894, *John Morris*, Med. Referee.

HISTORY OF CLAIMS AND FORMER ACTION.

Enlisted *August 16*, 1864 Last paid to \$ *12*
 Discharged *January 15*, 1867 ✓
 Pensioned from *July 29*, 1890 at \$ *12*, under the Act of June 27, 1890,
 for *Disease of heart*.

In declaration filed *July 29*, 1891, under Act of June 27, 1890, alleged
Rheumatism and affection of left side.

Declaration filed, 18 ; alleged

PRESENT CLAIM.

Declaration filed *March 24*, 1890, under general law alleges pleurisy and
 resulting affection of left side and rheumatism contracted at
Deep Bottom, Va. *December, 1864,*

Mo. M. C.

Claimant *does not* writes.

South, Div. b. M., Ex'r.

Record and Pension Office,

WAR DEPARTMENT,

Department of the Interior.

BUREAU OF PENSIONS,

Washington, D. C. Nov. 29, 1899

Respectfully referred to the Chief of the Record and Pension Office, War Department, requesting a full military and medical history of the soldier, his personal description, and former owner's name.



Commissioner of Pensions,

with the information that in the case of Samuel Bogg's 38-218. On the original records, however, the following additional information is given:

Ball April 30, 1865. Shows
liver absent. Guarding
Am. Train. S. S. 2 old. 2a
1 Brig. 95 A. Co. (part.)
June 30, 1865. Present
as referred to date of
B.M.

Has pleasure to
receipt it as follows:
Born Charlton Co. N. C.
Age 20 yrs. Occup. Farmer
Dark eyes. Black hair. combs
Height 5 ft 6 1/2 inches
Name of Farmer
owner of record:

John Bogg
John Bogg
Acting Commissioner.



BY AUTHORITY OF THE SECRETARY OF WAR:

H. D. Brewster

Chief, Record and Pension Office.
Person.

RECORD & PENSION OFFICE

NOV 29 1833 766 9
158

WAR DEPARTMENT

2092

Act of June 27 1890.

201

3-105.

PENSIONER DROPPED.

U. S. Pension Agency,

Knoxville, Tenn.

DEC 31 1900

Certificate No. 563805

Class INVALID.

Pensioner, Samuel Boggs

Soldier

Service April 10 1838 to Sep 10 1865

Hon. Commissioner of Pensions:

SIR: I have the honor to report that the
above-named pensioner who was last paid
at \$12, to 4 Aug, 1899,
has been dropped because of death

Date

Died Sep 6 1899

Very respectfully,

J. T. Wilder.

W

Pension Agent.

NOTE—Every name dropped to be thus reported at once,
and when cause of dropping is death, state date of death
when known.

12745b50m12-99



BUREAU OF PENSIONS

BOARD OF REVIEW.

Nov. 13, 1901

Widow's No. 705.637
Soldier, Daniel Rogge alias
Co. 9, 38 Reg't U.S. C.R. Inf

When Certificate is issued, return
papers to ~~Division~~
Div. for action on widow's
claim, general last,
T. P. Mittenell,
Rev.

T. W. DALTON,

Chief Board of Review.

Widow's Declaration for Pension.

This Declaration may be Executed before a Justice of the Peace, Notary Public, Clerk of Court, or before any other person authorized to administer oaths for general purposes.

State of North Carolina, County of Hertford, ss:

ON THIS 20 day of Sept A. D. one thousand eight hundred and ninety-nine
personally appeared before me A. S. Daniel a

within and for the County and State aforesaid Fleter Boggs

aged 48 years, who, being duly sworn according to law, makes the following declaration in order to obtain the Pension provided by Acts of Congress granting pension to widows: That she is the widow of Samuel Boggs (Soldier's name.)

who enlisted under the name of Samuel Boggs at Norfolk, Va.

on the sixth day of August A. D. 1864, in Company # 8, # 38 Regiment, (Company and Regiment of Service, if in the army; or vessel and rank, if in the navy.)

who was drawing pension on account of heart trouble from which he died (State nature of wounds and all circumstances attending them, or the disease and manner in which it was incurred, in either case showing soldier's death to have been the sequence.)

on the 6th day of Aug A. D. 1899,
who bore at the time of his death the rank of Ex. Private in ("In the service aforesaid," or otherwise.)

that she was married under the name of Fleter Beverly to said

Samuel Boggs on the 4 day of June A. D. 1870, by Albert Vann Curriculum at Winton, N. C. there being no legal

barrier to such marriage; that neither she nor her husband had been previously married (If either have been previously married so state, and give date of death or divorce of former spouse.)

that she has to present date remained his widow; that the following are the names and dates of birth of all his legitimate children yet surviving who were under sixteen years of age at date of father's death, viz:

of soldier by	<u>Amiston</u>	, born <u>August 1885</u>
of soldier by		, born 18
of soldier by		, born 18
of soldier by		, born 18
of soldier by		, born 18
of soldier by		, born 18
of soldier by		, born 18

That she has not abandoned the support of any one of her children, but that they are still under her care or maintainance.

(For such children as are not under her care claimant should account.)

that she has not in any manner engaged in, or aided or abetted the rebellion against the United States; that no

prior application has been filed

(If prior application has been filed, either by soldier or widow, so state, giving number assigned to it.)

that she hereby appoints, with full power of substitution and revocation,

W. H. WILLS, of Washington, D. C.,

her attorney to prosecute the above claim; that her residence is No.

Street,

2019

and her Post Office address is

Winton, County of

Hertford, State of North Carolina.

J. H. Moore

A. J. Beverly

(Two persons, who can write, must sign here.)

Fleter Boggs
man
(Signature of Claimant.)



ATTY ED

Also personally appeared J. W. Moore, residing at Winlow, N.C.

, and A. J. Beverly, residing at Winlow, N.C., persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say that they were present and saw Fleter Bogg's, the claimant sign her name (make her mark) to the foregoing declaration; that they have every reason to believe from the appearance of said claimant and their acquaintance with her that she is the identical person she represents herself to be; and that they have no interest in the prosecution of this claim.

(If witnesses sign by mark, two persons who can write must sign here.)

Sworn to and subscribed before me this 20 day of September

A. D. 1899

and I hereby certify that the contents of the above declaration, &c., were fully made known and explained to the applicant and witnesses before swearing, including the words
erased, and the words
added; and that I have no interest, direct or indirect in the prosecution of this claim.

[L. S.]

S. S. Daniel,
(Official Signature.)

U. S. Commissioner
(Official Character.)

NOTICE.—To be executed by Notary Public, Justice of the Peace or Clerk of Court, or before some officer authorized to administer oaths for *general purposes*. The official character and *signature* of any such officer, not required by law to use a *SEAL*, must be certified by the Clerk of a Court or other proper officer, and should give dates of beginning and close of official term.

WIDOW.

CLAIM FOR PENSION.

Fleter Bogg's, Applicant.

Widow of James Bogg,
Company G, 38th Regiment,
U. S. Cavalry Volunteers.



FILED BY
W. H. WILLIS,
ATTORNEY AT LAW,
312 Indiana Avenue,
Washington, D. C.

Cromwell Bros. Print. 512 E Street N. W.

ACCRUED PENSION.

Act of March 2, 1895.

2 briefs

can
know.

Southern Division

Certificate No. 563,805 Last issue April 22, 1891.

Pensioner, Samuel Boggs Act June 27, 1890.

Date of death, September 6, 1899.

Claimant, Fletcher Nunn (widow)

Winston,

Hertford County,

North Carolina.

Certificate not filed

Submitted for Admission, November 8, 1901

Charles Newburgh Examiner.

BOARD OF REVIEW.

Approved for admission.

Pay widow as above.

W. A. Wetmore

Reviewer,

Nov. 13, 1901

J. L. Paine

Rereviewer,

Nov. 14, 1901

CERTIFICATE DIVISION.

Accrued Pension Certificate and Order

{ Issued
Mailed

Nov. 14, 1901

20, 1901

Payable to

Mid.

Original certificate and voucher.

No M. C. Widow Claimant does not writes.

ACT OF JUNE 27, 1890.

INVALID PENSION.

6,8,8

Claimant, Samuel BoggsP. O., Winton & A. J. Beverly
County, HartfordRank, PrivateCompany, G.State, N. C.Regiment, 38 U.S.C. Vol. Inf.

Rate, \$

12-, per month, commencing July 29th, '90.

Disabled by

Dis medically appmed for

DROPPED

RECOGNIZED ATTORNEY.

1

Name, J. W. Glemer,Fee, \$ 10 = Agent to pay.P. O., City.Articles filed, 189

APPROVALS.

Submitted for Admir., July 29th, 1891.W. H. Hamsbury, Examiner.Approved for AdmissionApproved for Disease of Heart\$ 12Mar. 31, 1891

Legal Reviewer.

Medical Referee.

Not.now pensioned under other laws. Last paid to John Fisher, Apr. 7 '91 —, 18, at \$Pensioned from 18, at \$ 12, for

SERVICE SHOWN BY RECORD.

Enlisted Aug. 16th, 1864,honorably discharged July 25th, 1867Re-enlisted 18, honorably discharged 18Declaration filed July 29th, 1891, alleges permanent disability, not due to vicious habits, from Rheumatism and affection of left sideClaimant signs by mark.W. W. C.

Declaration for an Original Disability Pension.

Under Act of Congress approved June 27th, 1890.

~~This must be Executed before a COURT OF RECORD or SOME OFFICER THEREOF having Custody of the Seal.~~

State of North Carolina, County of Hertford, ss:

On this 25 day of July, A. D. one thousand eight hundred and ninety
personally appeared before me W. J. Galling Clerk

of the Superior COURT OF RECORD within and for the county and State
aforesaid Samuel Boggs aged 48 years, who, being

duly sworn according to law, declares that he is the identical Samuel Boggs

who was ENROLLED as a Private on the 6th day of Aug., 164, in Company 3 of the 38th Regiment of
commanded by Capt. Staunburg

in the war of the Rebellion and served at least ninety days, and was honorably discharged at
Texas, on the 25 day of Jan., 167;

that he is now unable to earn a support by reason of Rheumatism
& affection of left side (result of pleurisy)

That said disabilities are not due to his vicious habits, and are to the best of his knowledge and
belief permanent. That he has applied for pension under application No. 763029

That he is a pensioner under certificate No. for
(Give cert. No.)

(Here state the exact disability for which you are pensioned, copying it word for word from your certificate.)

and that he hereby renounces said pension to date from the allowance of a higher rate if granted under
this application. That he has not been employed in the military or naval service
otherwise than stated above.

(Here state what the service was, whether prior or subsequent to that stated above, and the dates at which it began and ended.)

That he has not been in the military or naval service of the United States since the 25th
day of Jan., 167, and that his occupation
has been that of a laborer on farm. That he is now greatly
disabled from obtaining his subsistence by manual labor by reason of the disability above described, and
he therefore makes this declaration for the purpose of obtaining a disability invalid pension under the
Act of Congress of June 27th, 1890. He hereby appoints with full power of substitution and revocation

J. W. FLENNER, of Washington, D. C.,

his true and lawful attorney to prosecute his claim. That he has heretofore
applied for a pension but his claim has not been allowed, the number of the claim being No. 763029
(If you have a claim for pension pending under the old law give number of the claim.)

that his residence is Hinton W. J. Boggs and that his post-office
address is The same, G. A. T. Beverly

A. J. Beverly
J. C. Parker

Samuel J. Boggs
Signature of Claimant

(Two witnesses who can write, sign here.)

Also personally appeared..... A. J. Burly, residing at near Wenton
Hartford County, Ct and J. C. Parker residing at Wenton persons whom I certify to be respectable and entitled to credit, and who being by me duly sworn, say that they were present and saw Samuel B. Oggs, the claimant, sign his name (make his mark) to the foregoing declaration; that they have known the claimant for 20 years and 20 years, respectively, and have every reason to believe from the appearance of said claimant and their acquaintance with him that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

(If Affiants sign by mark, two persons who can write sign here.)

(Signature of Affiants.)

SWORN TO AND SUBSCRIBED before me this 25th day of July A. D. 1890,
and I hereby certify that the contents of the above declaration were fully made known and explained to
the applicant and witnesses before swearing, including the words.....
.....erased and the words.....added ; and that
I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]

W. J. Gaeling
Clerk of the Superior Court

not Oct. 27 90 8-

See original #763.029

Disability Claim

PENTIMENT

Under the Act of Congress, June 27th, 1890.

Samuel Boyce, Applicant,
Co. H. O. C. Enlisted Aug 6 - Discharged Jan 29 -
38th Reg't. Vols. 1864 18



FILED BY

WASHINGTON, D. C.

J. W. FLENNER,

Rufus H. Darby, Printer, 1308 Pa. Ave., Washington, D. C.

ACT JUNE 27, '90.

3-402.

Certificate No. 563805

12 Name, Samuel Boggs

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., January 15, 1898.

SIR:

In forwarding to the pension agent the executed voucher for your next quarterly payment please favor me by returning this circular to him with replies to the questions enumerated below.

Very respectfully,

McClay Grand

Commissioner.

First. Are you married? If so, please state your wife's full name and her maiden name.

Answer. Frances Boggs. Maiden name. Bresly

Second. When, where, and by whom were you married?

Answer. June 14th 1870 by Rev. Emanuel Reynolds
Hinton-Kentford County N.C.

Third. What record of marriage exists?

Answer. Recorded license of the County of Kentford & state of N.C.

Fourth. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.

Answer. No sir. I have never married before.

Fifth. Have you any children living? If so, please state their names and the dates of their birth.

Answer. Ann W. Boggs was born January 175 - Matilda
Boggs was born Feb 177 - Sarah R. Boggs was born March 23rd 1879
Solmon, was born March 19th 1881 Argulur was born July
6th 1883. Ammiston Boggs, was born Sept Aug 21st 1885 -
Samuel Boggs

Date of reply, January 4, 1898

(Signature.)

0-8

5301b750m1-98

S.
Og No. 763029

WAR DEPARTMENT,

RECORD AND PENSION DIVISION.

Respectfully returned to the Commissioner
of Pensions.

1891

Samuel Bagger
Co. G. 35, Reg't. N.Y.C.Y.

was enrolled Aug. 16, 1864
and M.D. with Co. G. Jan. 25, 1867

1891

Write nothing to the left of this line.

The medical records show him treated as

follows:
H. Remond

From Aug. 16, 1864, to Oct. 25, 1865;
he held the rank of Pvt.

and during that period the rolls show him
present except as follows: Feb. 28, 1865;
Det. Ser. Guard to Ammunition
Train.

Other records furnish nothing
additional bearing upon this
case.

By authority of the Secretary of War:

J. C. Conner
Captain and Asst Surgeon, U. S. Army
Per *R* Date **JAN 6 1891**

Write nothing above this line.

(3-060.)

S
D.

Div.

Ex'n.

No. 763029

Samuel Boggs

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., *January 3.*, 1891

SIR:

It is alleged that *Samuel Boggs* enlisted *Aug 6..*, 1864
and served as a *Pvt* in Co. *38* Reg't *U.S.C.T.*
also as a *✓* in Co. *✓* Reg't

and was discharged at *Indianola Tex*, *January 20.*, 1867

It is also alleged that while on duty at *Deep Bottom Va*
on or about *Dec*, 1864, he was disabled by *pleurisy of left-
side, rheumatism*

and was treated in hospitals of which the names, locations, and dates of treatment are as follows:

In case of the above-named soldier the War Department is requested to furnish an official statement of the enrollment, discharge, and record of service so far as the same may be applicable to the foregoing allegation, together with full medical history. Please give the rank he held at the time he is claimed to have incurred the disability alleged, and if records show that he was not in line of duty during that period, let the fact be stated.

Very respectfully,

Genl B Raum

Commissioner.

The Officer in Charge of the

Record and Pension Division,

War Department.

GENERAL AFFIDAVIT.

State of North Carolina, County of Hertford, ss:

In the matter of Helen Boggs, widow of Samuel
Boggs

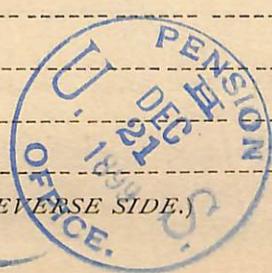
ON THIS 15 day of Decr, A. D. 1899, personally appeared before
 me U.S. Commissioner

County, duly authorized to administer oaths Fannie Vaughan
 aged 50 years, resident of Winton, in the County
 of Hertford, and State of N.C.
 whose Post Office address is Winton N.C.

and _____, aged _____ years, a resident of _____
 in the County of _____
 and State of _____, whose Post Office address is _____

well known to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

Armstrong Boggs was borned Aug 21st
 [NOTE.—Affiants should state how they gained a knowledge of the facts to which they testify.]
1885, I gained this knowledge from
being present (as midwife) at his
birth and have a record of the
same, and I well remember it was
a bad stormy night.



So. Div. further declare that I have no interest in said case and am not concerned in its prosecution.

[If Affiants sign by mark, two witnesses who can write sign here.]

[Signature of Affiants.]

STATE OF North Carolina, COUNTY OF Surfside, ss:

Sworn to and subscribed before me, this 18 day of Dec, 1899, by the above named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted her

with its contents before she executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is

personally known to me and that she is a credible person.

As Daniel

[Official Signature.]

U. S. Lawyer

[Official Character.]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

[L. S.]

To be executed before some officer authorized to administer oaths for general purposes. The official character and signature of any such officer not required by law to use a seal must be certified by the clerk of the proper court, giving dates of beginning and close of official term. If certificate on file, so state.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

So. Div.
9/1. 105637.
ADDITIONAL EVIDENCE.

CLAIM OF

Fletcher Vaughn

John Fletcher Vaughn
Witnessed by
John Fletcher Vaughn
Co. 38 U. S. C. I.

AFFIDAVIT OF

Fannie Vaughan

FILED BY

W. H. WILLIS,
ATTORNEY AT LAW,
Wills Building,
312 Indiana Ave.,
Washington, D. C.

CROMWELL BROS. PRINT. 606 E. ST.

511-6-98

North Carolina }
Hertford County, }

In the Matter of Heter Damm widow
of Moses Damm, alias Samuel Boggs who was
a Soldier in Co. B, 38th U.S. C. I. I. I. New-
son, Clerk Superior Court for said County,
hereby Certify that this day was exhibited
before me a Bible, which from the Records and
general appearance thereof, contains a
family record of the marriage, births and
deaths of said Moses Damm, the following
being copies, to wit: "Marriage was celebrated between
Moses Damm of Winston, N.C. and Heter Jordan
of Winston, N.C. on the 3rd of June 1870, at her
Mother's by Rev. Emanuel Reynolds."

"Anniston Damm ~~was born~~ ^{was born} 2nd of August 21, at
1885."

"Moses Damm died Sept. 6th 1859,"
Witness my hand and official seal this
4th day of January, 1900.

Jno. F. Newsom
clerk Superior Court



1900 S]

So. Div.

Wid. 705-637.

Claim of
Fletch Yann
widow of
Moses Yann
alias Samuel Bogen
Co. L 38th U.S. Inf.



RECEIVED.



Filed *by*



GENERAL AFFIDAVIT.

State of North Carolina, County of Stratford, ss:

In the matter of Fleter Ann Yann widow of Moses Yann
alias Samuel Bagg's Co. & 38th U. S. C. S.

ON THIS 4th day of January A. D. 1900, personally appeared before me a
Superior Court Clerk

Mack Jordan age 70 years, whose Post Office address is
Winton, N.C.

who, being duly sworn, declares in relation to said case as follows: That he was personally
[NOTE.—Affiant should state how they gain a knowledge of the facts,
which they testify.]

and intimately acquainted with Fleter Jordan and
Moses Yann prior to their marriage to each
other in the year 1870, the living in the immediate
neighborhood with both of them, and from
such acquaintance knows that neither had ever
been previously married to any one else or he
would have known or heard something of it

he further declares that he has no interest in said case, and is not concerned

in its prosecution.

C. D. Mitchell

A. J. Beverly

[If Affiant signs by mark, two persons who can write must sign here.]



[Signature of Affiant.]

Mack ~~his~~ Jordan ✓

No prior marriage

STATE OF *South Carolina*

, COUNTY OF *Abbeville*

, ss:

Sworn to and subscribed before me this

4/17

day of *January*

A. D. *1900*, by

above-named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted

with its contents before

executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that *he is a* credible person.

[he or she is a]

Affiant's creditability must be certified to in the handwriting of the officer by whom the paper is executed.

Geo F. Newsome, Clerk
[Official Signature.]

Superior Court
Abbeville County,
[Official Character]
If certificate on file, so state.
Winona N.P.

NOTE.—To be executed before a Notary Public, Justice of the Peace, or Clerk of Court, or before some officer authorized to administer oaths for *general purposes*. The official character and *signature* of any such officer, not required by law to use a *SEAL*, must be certified to by the Clerk of a Court of Record or other proper officer, and should give dates of beginning and close of official term. When once such certificate is filed in the Bureau of Pensions, his own certificate will be recognized during his term of office.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

So. DIVISION.

Wid. No. *7056370*

ADDITIONAL EVIDENCE.

CLAIM OF
W. H. Williams
Officer at
Miss Van Alstyne
Co. of *South-C. S.C.*



FILED BY

W. H. WILLS,

ATTORNEY AND SOLICITOR,

OFFICES:

Wills Bldg., 312 Indiana Ave. and Water Bldg.,
CROMWELL BROS., PRS., 605 E. ST. N. W., WASH., D. C.

5th-11-98

GENERAL AFFIDAVIT.

State of Columbia, County of Washington, ss:

In the matter of Fletcher Tamm, widow of Moses Tamm
alias Samuel Boyds, late Esq. 38. uses.

ON THIS 19 day of Dec A. D. 1899, personally appeared before me a

in and for the aforesaid County, duly authorized to administer oaths

Joshua Neivone 59 years, whose Post Office address is
1218, 3rd St. N.W. Washington D.C.

who, being duly sworn, declares in relation to said case as follows:

[NOTE.—Affiants should state how they gain a knowledge of the facts to

which they testify.]
well and intimately acquainted with
above named claimant Fletcher Tamm
and her husband Moses Tamm, knew
them both from childhood and can
positively state that neither of them
had ever been married to anyone
prior to the time they were married
to one another.

He further states that they
were never divorced from one another,
but that they lived together as
man and wife up to the time the
claimant died.

Affiant further declares that he has no interest in said case, and is not concerned
in its prosecution.

John A. Myer
A. J. Brown

[If Affiant signs by mark, two persons who can write must sign here.]



Joshua X. Neivone
his
mark
[Signature of Affiant.]

No prior marriage
no divorce

State of Columbia

STATE OF

COUNTY OF

ss.

Sworn to and subscribed before me this

19

day of

Oct

A. D. 1899, by

above-named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted

with its contents before

executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that

he is a credible person.

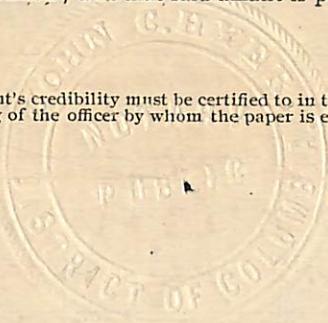
[he or she is a]

[Official Signature.]

[Official Character]

If certificate on file, so state.

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.



NOTE.—To be executed before a Notary Public, Justice of the Peace, or Clerk of Court, or before some officer authorized to administer oaths for *general purposes*. The official character and *signature* of any such officer, not required by law to use a *SEAL*, must be certified to by the Clerk of a Court of Record or other proper officer, and should give dates of beginning and close of official term. When once such certificate is filed in the Bureau of Pensions, his own certificate will be recognized during his term of office.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

DIVISION

No.

ADDITIONAL EVIDENCE.

CLAIM OF

FILED BY

W. H. WILLS,
ATTORNEY AND SOLICITOR,
OFFICES:

WILLS BLDG., 312 Indiana Ave. and Warder Bldg.,
WASHINGTON, D. C.

5m-11-98

CROMWELL BROS., PRS., 605 E ST. N. W., WASH., D. C.

GENERAL AFFIDAVIT.

State of North Carolina, County of Surry, ss:

In the matter of

Hester Vann, Widow of Moses Vann, alias Samuel Boggs C. 938 U. S. C.

ON THIS 22nd day of January, A. D. 1890, personally appeared before me a Superior court clerk in and for the aforesaid

County, duly authorized to administer oaths A. T. Beverly

aged 40 years, resident of near Winston, in the County

of Hertford, and State of North Carolina

whose Post Office address is Winston

and J. P. Parker, aged 26 years, a resident of

Near Winston, in the County of Hertford,

and State of North Carolina, whose Post Office address is

Winston, N. C.

well known to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

Deponents and say that Amiston Vann is the only child living under sixteen years of age at the date of filing Claim, now, 15 to 1899, and that said child's name is Amiston - that he is called by that name, and it is so recorded in the family record. Said Amiston is now living and is the son of Moses Vann alias Samuel Boggs. That they have this knowledge by reason of the fact that they are close neighbors, and affiant Beverly declares that he recorded his birth at the time of said birth.

[NOTE.—Affiants should state how they gained a knowledge of the facts to which they testify.]



Am. living, birth

they further declare that *they have* no interest in said case and *are* not concerned in its prosecution.

A. T. Beverly
J. P. Parker

[Signature of Affiants.]

[If Affiants sign by mark, two witnesses who can write sign here.]

STATE OF *North Carolina*, COUNTY OF *Stanford*, ss:

Sworn to and subscribed before me, this *22nd* day of *January*, 1890, by the above named affiant, and

I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted

them

with its contents before

they

executed the same. I further certify that I am in nowise

interested in said case, nor am I concerned in its prosecution; and that said affiant *are*

personally known to me and that *they are* credible persons,

Jos. F. Newsom

[Official Signature.]

Clerk Superior Court

[Official Character.]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

[L. S.]

To be executed before some officer authorized to administer oaths for general purposes. The official character and signature of any such officer not required by law to use a seal must be certified by the clerk of the proper court, giving dates of beginning and close of official term. If certificate on file, so state.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

Nov. 1905 6374
So. Div.

ADDITIONAL EVIDENCE.

CLAIM OF

Walter Van

*Walter Van and Sons
Co. of Stanford, S. C.*

AFFIDAVIT OF

A. T. Beverly
J. P. Parker



FILED BY

W. H. WILLS,
ATTORNEY AT LAW,
Wills Building,

511-6-98 CROMWELL BROS. PRINT. 606 E ST.

GENERAL AFFIDAVIT.

State of North Carolina, County of Shelby, ss:

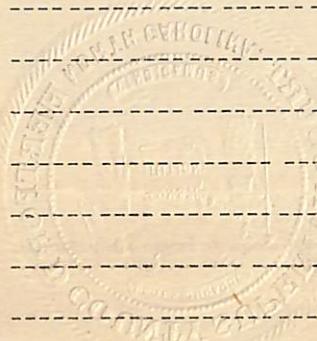
In the matter of Felix Boggs widow of Samuel Boggs deceased,

ON THIS 2nd day of December A. D. 1899, personally appeared before me a Superior Court Clerk in and for the aforesaid County, duly authorized to administer oaths Albert J. Beverly age 40 years, whose Post Office address is Winton, N.C.

who, being duly sworn, declares in relation to said case as follows: That Amiston Boggs,

[NOTE.—Affiants should state how they gain a knowledge of the facts to which they testify.]

Son of Samuel Boggs, was born on the 21st day of August 1885; That he knows that just a few days after the birth of said Amiston Boggs that he went to the home of Samuel Boggs to take his note for a horse he had sold him, That said Boggs executed the note and while then he asked affiant to record the birth of Amiston in his Bible which he did on that day.



He further declares that he has no interest in said case, and is not concerned in its prosecution.

W. A. Andrew

[If Affiant signs by mark, two persons who can write must sign here.]



A. J. Beverly

[Signature of Affiant.]

Winton
N.C.
birth

STATE OF North Carolina, COUNTY OF Stanford, ss:
Sworn to and subscribed before me this 2nd day of December A. D. 1897, by
above-named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted him with its contents before
executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its
prosecution; and that said affiant is personally known to me and that he is a credible person.
[he or she is a]

Affiant's credibility must be certified to in the hand-writing of the officer by whom the paper is executed.

John F. Neesom
[Official Signature.]
Clerk Superior Court
[Official Character]
If certificate on file, so state. Minot, N.D.

NOTE.—To be executed before a Notary Public, Justice of the Peace, or Clerk of Court, or before some officer authorized to administer oaths for *general purposes*. The official character and *signature* of any such officer, not required by law to use a *SEAL*, must be certified to by the Clerk of a Court of Record or other proper officer, and should give dates of beginning and close of official term. When once such certificate is filed in the Bureau of Pensions, his own certificate will be recognized during his term of office.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

Southern Division
File No. 105637

ADDITIONAL EVIDENCE.

CLAIM OF int. of Samuel
Gleter Bogg
Co. 38 "Ziffy 6. Syf

Madris Sessions
All Davis



FILED BY
W. H. WILLS,
ATTORNEY AND SOLICITOR,
OFFICES:
WILLS Bldg., 312 Indiana Ave. and Winder Bldg.,
WASHINGTON, D. C.

CROMWELL BROS., PRS., 605 E ST. N. W., WASH., D. C.
5th-11-98

GENERAL AFFIDAVIT.

State of North Carolina, County of Hertford, ss:

In the matter of Peter Boggs

J. Collett Gibson, M.D.

ON THIS Sixth day of November A.D. 1899, personally appeared before me a Clerk of Superior Court in and for the aforesaid County, duly authorized to administer oaths Dr. J. Collett Gibson age 33 years, whose Post Office address is Winston, Hertford County, N.C.

who, being duly sworn, declares in relation to said case as follows:

[NOTE.—Affiants should state how they gain a knowledge of the facts to which they testify.]

Boggs during his last illness and that he died of Consumption on the Sixth day of September 1899. I further declare that I have no interest in said case.

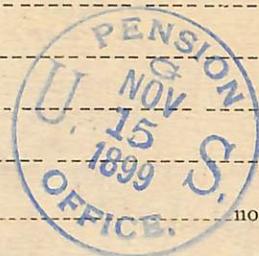


Further declares that no interest in said case, and not concerned in its prosecution.

[If Affiant signs by mark, two persons who can write must sign here.]

[Signature of Affiant.]

Death



STATE OF North Carolina, COUNTY OF St. Pauls, ss:

Sworn to and subscribed before me this 6th day of November A. D. 1899, by
above-named affiant, and I certify that I read said affidavit to said affiant, including the words
he wrote said affidavit
erased, and the words
added, and acquainted with its contents before
executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its
prosecution; and that said affiant is personally known to me and that he is a credible person.
[he or she is a]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

Jno. F. Neeson
[Official Signature.]

Clerk Superior Court
[Official Character]

If certificate on file, so state. Winter

N.C.

NOTE.—To be executed before a Notary Public, Justice of the Peace, or Clerk of Court, or before some officer authorized to administer oaths for *general purposes*. The official character and *signature* of any such officer, not required by law to use a *SEAL*, must be certified to by the Clerk of a Court of Record or other proper officer, and should give dates of beginning and close of official term. When once such certificate is filed in the Bureau of Pensions, his own certificate will be recognized during his term of office.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

Division.

No.

ADDITIONAL EVIDENCE.

CLAIM OF

FILED BY
W. H. WILLIS,
ATTORNEY AND SOLICITOR,
OFFICES:

Willis Bldg., 312 Indiana Ave. W. H. Willis,
WASHINGTON, D. C.

511-1-98

RECORD
CROMWELL BROS., PRS., 608 E. ST. N. W., WASH., D. C.

North Carolina
Hertford County

I, S. W. Monk Reg. of Deeds
in and for said county do
hereby certify that the records
on file in this office show
that Moses Vacca of Hertford
Co. N.C. obtained a license to
marry Rector Gordon of said
county and that they (Moses
Vacca and Rector Gordon)
were married in the county
aforesaid on the 23rd day of
June 1890. witness my hand
and affix official seal. This
Nov. 20th 1899.

S. W. Monk
Reg. of Deeds.



Marriage

#705.637

Provisional certificate

Moses Boagge
of Belvoir

claim of
Fletor Boagge
widow of
Samuel Boagge
6. J. 38 " U.S. L. Inf.

Filed by



GENERAL AFFIDAVIT.

State of North Carolina, County of Charlotte, ss:

In the matter of Fleter Vann, widow of Moses Vann, alias Samuel
Boggs, deceased of Co. G, 38th Regt U. S. Colored troops

ON THIS 26th day of December A. D. 1899, personally appeared before me a

Superior Court Clerk in and for the aforesaid County, duly authorized to administer oaths

A. T. Beverly age 41 years, whose Post Office address is

Winton, N. C.

who, being duly sworn, declares in relation to said case as follows: That he was intimate
acquainted [NOTE.—Affiants should state how they gain a knowledge of the facts to
which they testify.]

by with Fleter Vann whose maiden name was
Fleter Jordan, and also with Moses Vann several
years before their marriage and knows that neither
of them had ever been previously married. Had
such a thing occurred he would have known
or heard something of it.

further declares that he has no interest in said case, and is not concerned
in its prosecution.

[If Affiant signs by mark, two persons who can write must sign here.]

[Signature of Affiant.]



No prior marriage

STATE OF *North Carolina*

COUNTY OF *Hartford*

, ss.

Sworn to and subscribed before me this

26th

day of

December

A. D. 1899, by

above-named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted *him* with its contents before

He executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that *he is a* credible person.
[he or she is a]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

Jno F. Neeson
[Official Signature]
Clerk Superior Court
[Official Character]
Hartford County.
If certificate on file, so state.

NOTE.—To be executed before a Notary Public, Justice of the Peace, or Clerk of Court, or before some officer authorized to administer oaths for *general purposes*. The official character and *signature* of any such officer, not required by law to use a *SEAL*, must be certified to by the Clerk of a Court of Record or other proper officer, and should give dates of beginning and close of official term. When once such certificate is filed in the Bureau of Pensions, his own certificate will be recognized during his term of office.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

DIVISION.

NO.

ADDITIONAL EVIDENCE.

CLAIM OF

FILED BY

W. H. WILLS,

ATTORNEY AND SOLICITOR,

OFFICES:

WILLS BLDG., 312 Indiana Ave. and Water Bldg.,
CROMWELL BROS., PRS., 605 E ST. N. W., WASH., D. C.

5m-11-98

North Carolina, Surry County, &c.

In the matter of Fletcher Vann, widow of Moses Vann,
Alias Samuel Boggs, &c. &c. 38th U. S. C. L.

On this 13th day of January 1900, personally appeared before me a Superior Court Clerk, in and for said County, duly authorized to administer oaths Robert Jones, age 65 years, whose Post office address is Winston, N. C. who being duly sworn, deposes in relation to said case as follows: That he, the said Robert Jones, is and has been personally and intimately acquainted Fletcher Vann, who was Fletcher Jordan before her marriage, from her childhood, or at least 45 years. That he knew Moses Vann from childhood until the time of his death, or about 50 years
" intimately, except the time that he was in the Army. He having been raised in the same neighborhood, with, and living continuously until now a near neighbor. He knows from such acquaintance that neither had ever been previously married to any one else or he would have known or heard something of it. He further declares that he has no interest in said case whatever, and is not concerned in its prosecution.

Witnesses:

W. J. Boyette
A. G. Beverly

Robert ^{his}
_{mark} Jones ✓

No prior marriage



North Carolina }
Hertford County }

Swear to and subscribed before me this 13th day of January 1900, by above named affiant, and I certify that I read said affidavit to said affiant and acquainted him with its contents before he executed the same.
I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that he is a credible person.

Witness my official Seal,

Jas F. Newsome
clerk Superior Court
Hertford County.



RECEIVED
JAN 13 1900
H DIV.



GENERAL AFFIDAVIT.

State of N. C., County of St. Louis, ss:
In the matter of Fletcher Tann widow of Moses
Tann alias Samuel Bogg & C. G. 38th b. s. c.
ON THIS 3rd day of February A. D. 1900 personally appeared before me a
Superior Court Clerk in and for the aforesaid County, duly authorized to administer oaths
Fletcher Tann age 50 years, whose Post Office address is
Winton, N. C.

who, being duly sworn, declares in relation to said case as follows:

[NOTE.—Affiants should state how they gain a knowledge of the facts to

[NOTE.—Affiants should state how they gain a knowledge of the facts to which they testify.]

of Moses Tamm, Elias Sennard, Roger, ~~detainee~~
that she has not disposed of any Real Es-
tate since Nov. 18th 1899. In fact; she has
none, left her by her late husband or any
other person whatever.

A circular library stamp with the text "UNIVERSITÄTSBIBLIOTHEK GÖTTINGEN" around the perimeter and the number "1065" in the center.

further declares that _____ no interest in said case, and _____ not concerned

in its prosecution.

A. L. Beverly, Hinsdale, N. E.

W. W. Brewerton.

Fletch her Name
[Signature of Affiant.]

[If Affiant signs by mark, two persons who can write must sign here.]

5 [Signature of Affiant.]

STATE OF North Carolina, COUNTY OF Stratford, ss.

Sworn to and subscribed before me this 3rd day of February A. D. 1900, by

above-named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted her with its contents before

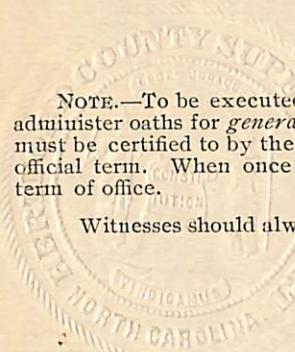
she executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that she is a credible person.
[he or she is a]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

Jno F. Neesom
[Official Signature.]
Clerk Superior Court

[Official Character]

If certificate on file, so state.



NEWBURGH
27, 1900.
WILLS NO. 5637

ADDITIONAL EVIDENCE.

CLAIM OF

Ernest W. Wills
Moses Yancey
Sam'l Rogers
G. B. S. Weller

Feb 27 '00



FILED BY
W. H. WILLS,
ATTORNEY AND SOLICITOR,
OFFICES:
WILLS Bldg., 312 Indiana Ave. and Winder Bldg.,
WASHINGTON, D. C.

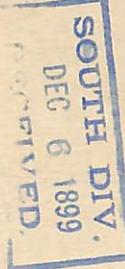
WILLS Bldg., 312 Indiana Ave. and Winder Bldg.,
WASHINGTON, D. C.

24
First 99

JAC
Form 490.

2-3140

77. RETURN SLIP.



South Div.
b. M., Ex'r.
Wid. Orig. No. 705,637
Samuel Boggs
G 38 U. S. b. Vol. Inf.

Departm

BY

Washi

SIR:

In the above-described claim for pension it appears
Priv. Co. G, 38 Reg't U. S. b. l.

You are requested to inform this Bureau whether
him at the date of his death and, if so, to state the
the claim was filed, and whether it has been allowed.
Please return this circular with your reply.

Very respectfully,

The AUDITOR FOR THE WAR DEPARTMENT,
Treasury Department

Respectfully returned
To the

Commissioner of Pensions.

In the case of Samuel Boggs, late Pvt., Co. G, 38th U.S.C.T., the records of this office do not show that a claim for arrears of pay has been filed and the desired information can not, therefore, be furnished.

F. H. Morris,
Auditor.

Pen. Clm. #705,637.

F.A.C.
Room 77.
E.M.J.



Mail and Files.

24
Cent 9m



3-064.

South Div.
S. M., Ex'r.
Wid. Orig. No. 705, 637
Samuel Boggs
G 38 U. S. b. Vol. Inf.

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., Nov. 28, 1899

SIR:

In the above-described claim for pension it appears that

Priv. Co. G, 38 Reg't U. S. b. Vol. Inf., died August 6, 1899

You are requested to inform this Bureau whether a claim has been filed for any pay or allowance due him at the date of his death and, if so, to state the name and post-office address of the claimant, when

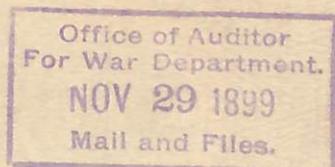
the claim was filed, and whether it has been allowed, together with names and postoffice addresses of the identifying witnesses.

Please return this circular with your reply.

Very respectfully,

Alvey Granth
Commissioner.

The AUDITOR FOR THE WAR DEPARTMENT,
Treasury Department.



2776b5m

GENERAL AFFIDAVIT.

State of Columbia, County of Washington, ss:

In the matter of Peter Vann, widow of Moses Vann
alias Samuel Boggs, Co. G. 38. U.S.C.A.

ON THIS 19 day of Dec A. D. 1899, personally appeared before me a

in and for the aforesaid County, duly authorized to administer oaths

Joshua Newcome age 59 years, whose Post Office address is

1218-3rd St. S.W. Washington, D.C.

who, being duly sworn, declares in relation to said case as follows:

[Note.—Affiants should state how they gain a knowledge of the facts to

which they testify.]
and intimately acquainted with the
above named claimant and her husband
Moses Vann. Knew them both from
childhood, served in same Company
in his regiment with Moses Vann, Co. G
38. U.S.C.A. and know that he enlisted
and served in said company and
regiment under name of Samuel
Boggs. He further states that
prior to the time he enlisted, the
said soldier was always known as
Moses Vann and was known as
Moses Vann after his discharge up
to the time of his death.

He was the identical Moses Vann
who served in Co. G. 38. U.S.C.A. under
name of Samuel Boggs.

He further declares that he has no interest in said case, and is not concerned
in its prosecution.

John C. Ayer
A. J. Beatty

[If Affiant signs by mark, two persons who can write must sign here.]



Joshua Newcome
mark

[Signature of Affiant.]

Identity

State of Columbia

County of

Washington

ss:

Sworn to and subscribed before me this

19

day of

A. D. 1899, by

above-named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted him with its contents before

executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that he is a credible person.

[he or she is a]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

John Chyler.
[Official Signature]
Notary Public
[Official Character]

If certificate on file, so state.



NOTE.—To be executed before a Notary Public, Justice of the Peace, or Clerk of Court, or before some officer authorized to administer oaths for *general purposes*. The official character and *signature* of any such officer, not required by law to use a *SEAL*, must be certified to by the Clerk of a Court of Record or other proper officer, and should give dates of beginning and close of official term. When once such certificate is filed in the Bureau of Pensions, his own certificate will be recognized during his term of office.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

Division

Div. No. 705637

ADDITIONAL EVIDENCE.

CLAIM OF

Hester Yann

Witnesses of
Moses Yann alias Sam'l. Brog.
G. L. 38 & H. S. C. G. 1995



FILED BY

W. H. WILLS,
ATTORNEY AND SOLICITOR,

OFFICES:

Wills Bldg., 312 Indiana Ave. and Wadsworth Bldg.,
WASHINGTON, D. C.

5pm-11-1900
CROMWELL BROS., PRS., 605 E ST. N. W., WASH. D. C.

JAN 20 1900
Bureau of Pensions.

GENERAL AFFIDAVIT.

State of Pennsylvania, County of Philadelphia, ss:

In the matter of Fletcher Vann Viden & Moses Vann alias Samuel Boggs lev 9 88 S. v. Col. Troup.

ON THIS Thirteenth day of March A. D. 1900 personally appeared before me a

Notary Public in and for the aforesaid County, duly authorized to administer oaths

Joseph Reynolds age 57 years, whose Post Office address is
2644 York Street Philadelphia Pennsylvania

who, being duly sworn, declares in relation to said case as follows:

[NOTE.—Affiants should state how they gain a knowledge of the facts to

I was a member of the same Regiment (38th) U. S. Colored
which they testify.) Troup) and was discharged at the same time with Samuel
Boggs, and came home with him from the army. After that
I knew him in the city of Philadelphia he was known in
winter Philadelphia as Moses Vann, am satisfied that the man
known as Samuel Boggs while in the army and Moses
Vann were one and the same person



further declares that I have no interest in said case, and I am not concerned
in its prosecution.

Joseph Reynolds
[Signature of Affiant.]

[If Affiant signs by mark, two persons who can write must sign here.]

I certify,

STATE OF Pennsylvania.

, COUNTY OF Philadelphia.

, ss:

Sworn to and subscribed before me this Thirteenth day of March AD 1900, by
above-named affiant, and I certify that I read said affidavit to said affiant, including the words The City of Philadelphia
and, Philadelphia erased, and the words Winton North Carolina and.
Winton added, and acquainted him with its contents before
he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its
prosecution; and that said affiant is personally known to me and that he is a credible person.
[he or she is a]

Daniel M. Boring

[Official Signature.]

Notary Public

[Official Character.]

If certificate on file, so state.

Affiant's credibility must be certified to in the hand-writing of the officer by whom the paper is executed.
~~note the word the City of Philadelphia and Philadelphia written out before signing, and Winton North Carolina and Winton inserted before signing~~
Daniel M. Boring
Notary Public

NOTE.—To be executed before a Notary Public, Justice of the Peace, or Clerk of Court, or before some officer authorized to administer oaths for *general purposes*. The official character and *signature* of any such officer, not required by law to use a *SEAL*, must be certified to by the Clerk of a Court of Record or other proper officer, and should give dates of beginning and close of official term. When once such certificate is filed in the Bureau of Pensions, his own certificate will be recognized during his term of office.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

DIVISION.

Box No 905637

ADDITIONAL EVIDENCE.

CLAIM OF,

Peter Sanders
Moses Yann Alvar
Sam'l Boggs
G. B. Lewis

Oct 27. '98



FILED BY

W. H. WILLIS,
ATTORNEY AND SOLICITOR,
OFFICES:

WILLIS BLDG., 312 Indiana Ave. and Water Bldg.,
WASHINGTON, D. C.

OCT 1900 684 0
C. S. WAR DEPARTMENT

3-061.

South. Div.
to, M., Ex'r.
Wid. Orig. No. 705, 637
Moses Samuels Samuels Negro
838 U. S. B. Vol. Inf.

Record and Pension Office,
WAR DEPARTMENT.

Respectfully returned to the
Commissioner of Pensions.

The rolls show that
Joseph Reynolds
is dead.

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C. April 3, 1894.

Sir:

For use in the above-entitled claim for pension
please furnish a report from the records of your
office as to the presence or absence on or about
January 1865 and
of Joseph Reynolds
of

Private 603 38th & B. Vol. Inf.

The station of the
during said period was as follows:



and the station at that time of the

Very respectfully,

H. D. Bassett
H. D. Bassett
SOUTH DAKOTA
The CHIEF OF THE
RECORD AND PENSION OFFICE
WAR DEPARTMENT.

Colonel U. S. Army, Chief of Office.

APR 4 1900

0-4

GENERAL AFFIDAVIT.

State of North Carolina, County of Hertford, ss:

In the matter of Fleter Vann, widow of Moses Vann, alias
Samuel Boggs dead, lot of 60 A. 38 Regt. U. S. colored troops

ON THIS 26th day of December, A. D. 1899, personally appeared before
 me a Superior Court Clerk in and for the aforesaid

County, duly authorized to administer oaths A. J. Beverly

aged 41 years, resident of near Winton, in the County
 of Hertford, and State of North Carolina

whose Post Office address is Winton, N. C.

and Jno W. Vann, aged 33 years, a resident of near Winton
 in the County of Hertford

and State of N. C., whose Post Office address is Winton, N. C.

well known to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

that they have known the claimant all their
[NOTE.—Affiants should state how they gained a knowledge of the facts to which they testify.]
lives, having always lived near her and visiting her
frequently at her home: say they know of
their own knowledge that she does not own any
real property, nor has she owned any at any time—
that she has one house and some few pigs—that
she has no income, nor is any legally bound for
her support. The personal property is not worth
to exceed fifty dollars.

They further declare from their long intimate acquaintance
with said widow and her husband that they
know that both lived together as man and wife up
to the time of husband's death and they were never
divorced. Nor has the widow remarried since
his death. Had they would have known something
of it.



Dependence

(SIGN ON THE REVERSE SIDE.)

Nondivorced widow

and further declare that they have no interest in said case and are not concerned in its prosecution.

A. J. Beverly
John W. Van

[If Affiants sign by mark, two witnesses who can write sign here.]

[Signature of Affiants.]

STATE OF _____, COUNTY OF _____, ss:

Sworn to and subscribed before me, this 26 day of December, 1899, by the above named affiant; and

I certify that I read said affidavit to said affiantS , including the words

..... erased, and the words

..... added, and acquainted.....

with its contents before Elsey executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiants A. J. Beverly and
John W. Davis are personally known to me and that they are each credible persons,

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

[L. S.]

Jos. F. Newson
[Official Signature.]

[Official Signature.]

Clerk Superior Court

[Official Character.]

Stratford County, N. C.
[Official character.]

Stratford County, N. C.
[Official character.]

To be executed before some officer authorized to administer oaths for general purposes. The official character and signature of any such officer not required by law to use a seal must be certified by the clerk of the proper court, giving dates of beginning and close of official term. If certificate on file, so state.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

ADDITIONAL EVIDENCE.

CLAIM OF

CLAIM OF
Peter Yann
widow of Moses Yann
and
Co. Affidavit of
A. G. Kennedy
- Mrs. N. Yann

SOUTH DIV.
JAN 3 1900
RECEIVED.

FILED BY

W. H. WILLS,
ATTORNEY AT LAW,
Wills Building,

312 Indiana Ave., Washington, D. C.

Winton, N. C.

189

State of North Carolina
Hertford County

I, S. E. Marsh, Reg. of Deeds in and for
said county, do hereby certify that the
Tax List on file in this office shows that
Moses Vann resided of Minford
Township returned for taxation for
the year 1899. Personal property to the
amount of one hundred and
fifty dollars. I witness whereof I
have hereunto set my hand and affixed
official seal. This 1st day of January
1900.

S. E. Marsh

Reg. of Deeds.



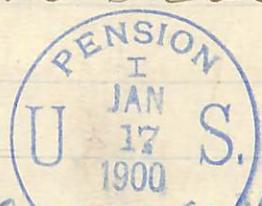


Winton, N. C.,

189

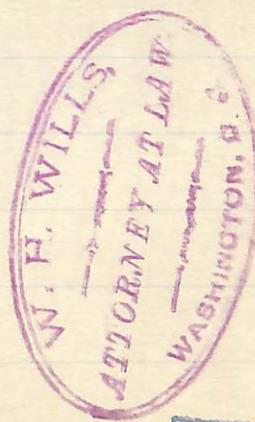
North Carolina }
Hertford County }

I hereby certify that Moses Vane
of Winton Township Hertford County
retained for taxation - for the
year 1899, as shown in the tax list
on file in this office for said
year. Personal property valued
at \$160⁰⁰ and that no real estate
was retained either by him or
his widow (Deleteria Vane) for
taxation - during said year (1899),
and that said Deleteria Vane retained
no property of any kind or
description for taxation during
said year, witness my hand and
official seal this 15th day of January



Assist.

S. E. Marsh.
Reg. of Deeds.



2 briefs.

WIDOW'S PENSION. 705637

Claimant Fleter Vann

P. O. Winton,

Soldier Moses Vann alias Samuel Boggs

Rank Private

County Hertford, State North Carolina Regiment 38 U. S. A. Vol. Inf.

Rate, \$8 per month, commencing November 15, 1899, and \$2 additional for each child, as follows:

Annoton

{ Born, August 21, 1885 } Commencing November 15, 1899.

{ Born, , } Commencing.

{ Born, , } Commencing. INCREASED TO \$10 PER MONTH FROM JUNE 4, 1928 - ACT MAY 23, 1928

{ Born, , } Commencing.

{ Born, , } Commencing.

{ Born, , } Commencing.

Payments on all former certificates covering any portion of same time to be deducted.

All pension to terminate , 190 , date of

RECOGNIZED ATTORNEY.

Name W. H. Wills,

Fee, \$10.

Agent to pay.

P. O. Washington, D. C.

Articles filed.

, 189

APPROVALS.

Submitted for Admission, November 8, 1901, Charles Newburgh, Examiner.

Approved for admission.

Nov 13, 1901.

M. P. Willmott Rev.

Nov 14, 1901.

J. L. Daine

Legal Reviewer.

The soldier was pensioned at \$12 per month for dis. of heart.

Enlisted August 16, 1864

Soldier's app'n filed March 24, 1890, O.S. Reg'd
" " " July 29, 1891, N.S.

honorably disch'd January 25, 1867

Clt's app'n under other laws September 23, 1899.

Reenlisted not , 18

Former marriage of neither , 18

honorably disch'd

Death of former

Died September 6, 1899

Clt's marriage to soldier June 3, 1870

Declaration filed November 15, 1899

no divorce
Clt not remarried

Claimant signs by mark.

No M. C.

· DECLARATION FOR WIDOW'S PENSION

ACT OF JUNE 27, 1890.

To be Executed Before Any Officer Duly Authorized to Administer Oaths, but must have a seal affixed to this Declaration.

State of North Carolina, County of Hertford, ss:

On this 9th day of November, A. D. one thousand eight hundred and ninety nine personally appeared before me a Superior Court Clerk within and for the county and State aforesaid, Fleeter Boggs
..... aged 50 years, a resident of the of Hinton
County of Hertford, State of N. C., who being duly sworn according to law declares that she is the widow of Samuel Boggs, who enlisted under the name of Samuel Boggs, at on the sixth day of September, A. D. 1864, in Co. G 38th U. S. C. T. Here state rank, Co., and Regt. if in military service, or vessel, if in the Navy and served at least ninety days in the late war of the Rebellion, who was *honorable discharged*

..... and died September 6, 1899

The cause of death need not be stated.

That she was married under the name of Fleeter Reynolds Jordan to said Samuel Boggs on the 4th day of June 1872 by Emmanuel Reynolds at Home of Plaintiff, there being no legal barrier to said marriage.....

If there was a former marriage of claimant or her husband, state it here and how dissolved.

.....
That she has not remarried since the death of the said Samuel Boggs.....
Name of Soldier or Sailor.

That she is without other means of support than her daily labor; that names and dates of births of all the children now living under sixteen years of age of the soldier are as follows:

Armstrong, born Aug., 1870, born 18.....
....., born 18..... born 18.....
....., born 18..... born 18.....

That she has heretofore applied for pension and the number of her application is.....

..... Wid. Org. No. 705637 Widow of Samuel Boggs.
Be careful to fill this part of the blank correctly.

That she makes this declaration for the purpose of being placed on the pension-roll of the United States under the provisions of the act of June 27, 1890.

She hereby appoints, with full power of substitution and revocation

W. H. WILLS, OF WASHINGTON, D. C.,

her true and lawful attorney to prosecute her claim and hereby agrees to pay a fee of \$10 on allowance of claim. That her P. O. address is Hinton, N. C......

County of Hertford State of North Carolina

Fleeter Boggs,
Claimants Signature.

Attest: A. J. Beverly

J. P. Parker



ATTY FILED

Also personally appeared A. J. Beverly, residing at Winton, N.C., and J. P. Parker, residing at Winton, N.C., persons whom I certify to be respectable and entitled to credit, and who being duly sworn, say that they were present and saw Hester Boggs, the claimant, sign her name (make her mark) to the foregoing declaration, that they have every reason to believe from the appearance of said claimant and an acquaintance with her for 30 years and 10 years, respectively, that she is the identical person she represents herself to be; and that they have no interest in the prosecution of this claim.

A. J. Beverly
J. P. Parker

Signatures of Witnesses.

SWORN TO AND SUBSCRIBED before me this 9th day of November, A. D. 1899 and I hereby certify that the contents of the above declaration, &c., were fully made known and explained to the applicant and witnesses before swearing; including the words.....
.....erased and the words.....
.....added, and that I have no interest, direct or indirect, in the prosecution of this claim.

[SEAL.]

Geo. F. Newsom

Signature.

Clerk Superior Court
Winton, N.C.
Official Character.

NOTES.

The act of June 27, 1890, requires, in widow's case:

- (1) That the soldier served at least *ninety days* in the war of the rebellion and was *honorable discharged*.
- (2) Proof of soldier's death (death cause need not have been due to Army service).
- (3) That widow is "without other means of support than her daily labor."
- (4) That widow was married to soldier prior to June 27, 1890, date of the act.
- (5) That all pensions under this act commence from date of receipt of application in the Pension Bureau.

Widow's Claim.

Claimant Hester Boggs
Soldier James Boggs
Service Co. 30th N.C. S.C.

ADDRESS:

Winton, N.C.



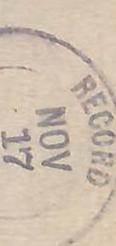
W. H. WILLS,

Attorney and Solicitor of Claims

AND PATENTS,

WASHINGTON, D. C.

Date of Execution Nov 17



GENERAL AFFIDAVIT.

State of North Carolina, County of Hertford, ss:

In the matter of Felix Boggs.

ON THIS 20 day of Nov A. D. 1899, personally appeared before me a
U.S. Commissioner Felix Boggs age 50 years, whose Post Office address is
Winton, Hertford Co. N.C.

who, being duly sworn, declares in relation to said case as follows: In my former affidavit
[NOTE.—Affiants should state how they gain a knowledge of the facts to

date of death of my husband given as August 6th was
which they testify.]
a mistake on the part of the party who filed out affidavit for me
the correct date is September 6th 1899. In regard to the date of
Marriage the record date of June 3rd 1870 must be correct, the
date of June 4th 1870 was given from memory of myself and
was an error as I had not then examined the Court
records, my husband up until 1864 belonged to Mr. Abert
Vann sometime in that year he left Mr. Vann and under
the name of Samuel Boggs enlisted in the Union
Army, on being mustered out he again assumed
his old name of Vann, and we were married
under this name.



further declares that no interest in said case, and not concerned

in its prosecution.

A. J. Beverly
J. P. Parker

[If Affiant signs by mark, two persons who can write must sign here.]

Felix Boggs
mark [Signature of Affiant.]

Statement

STATE OF

North Carolina

, COUNTY OF

Buncombe

, ss.

Sworn to and subscribed before me this

20

day of

Nov

A. D. 1899, by

above-named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted *her* with its contents before

she executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that *she is a* credible person.
[he or she is a]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

A. S. Daniel

[Official Signature.]

U. S. Commissioner

[Official Character]

If certificate on file, so state.

NOTE.—To be executed before a Notary Public, Justice of the Peace, or Clerk of Court, or before some officer authorized to administer oaths for *general purposes*. The official character and *signature* of any such officer, not required by law to use a *SEAL*, must be certified to by the Clerk of a Court of Record or other proper officer, and should give dates of beginning and close of official term. When once such certificate is filed in the Bureau of Pensions, his own certificate will be recognized during his term of office.

Witnesses should always give their Post Office address and state their means of knowing the facts to which they testify.

ADDITIONAL EVIDENCE.

CLAIM OF

No. 705-634

*Peter Boogaard.
of Samuel J. Boogaard.
Co. G-38" U.S. Inf'y.
All laws.*



FILED BY

W. H. WILLIS,
ATTORNEY AND SOLICITOR,
OFFICES:

Willis Bldg., 312 Indiana Ave. and Water Bldg.,
WASHINGTON, D. C.

CLAIMANT'S AFFIDAVIT.

State of North Carolina, County of Surfside, ss:

In the matter of Fleter Boggs widow of Samuel Boggs
alias) Moses Vann b. 1838" U.S. led 5

ON THIS 26th day of December A. D. 1899, personally appeared before me a
Superior Court Clerk in and for the aforesaid County, duly authorized to administer oaths
Fleter Boggs alias, Fleter Vann age 50 years, whose Post Office address is
Winton Meertfice County N.C.

who being duly sworn, declares in relation to said case as follows:

[NOTE.—Affiants should state how they gain a knowledge of the facts to
which they testify.]

My husband was generally known at home as
Moses Vann he only used the name
of Samuel Boggs while in the U.S. service.
He left his master to enlist and
changed his name to Samuel Boggs. On
his return from the army he again took
his old family name. I know the
above from my own knowledge as I
knew him before the war, and when
he enlisted, I am known as Fleter
Vann as when the marriage license
was issued he was going by his
old name of Moses Vann.



A. J. Bevley

John D. Vann

[If affiant signs by mark, two persons who can write must sign here.]

[Signature of affiant.]

Statement

STATE OF *North Carolina*

, COUNTY OF *Hickory*

, ss:

Sworn to and subscribed before me this

26th

day of *December*

A. D. *1899*, by

above-named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted *her* with its contents before

she executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that *she is a* credible person.
[he or she is a]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

Jno. F. Newson
[Official Signature.]

Clerk Superior Court
[Official Character.]

If certificate on file, so state.

Hickory County.

This affidavit may be executed before a Notary Public, Clerk of the Court, Justice of the Peace, or any other officer duly authorized to administer oaths for general purposes. If the officer before whom this affidavit is executed is not required by law to use a seal, his official character and signature must be certified by the proper State, County, or City Officer under his official seal. If a certificate as to official character, signature, and term of office has been filed in the Bureau of Pensions for general reference, all that is necessary is to have it referred to. One such certificate is all that is necessary during the officer's term of office.

DIVISION.

NO.

ADDITIONAL EVIDENCE.

CLAIM OF



FILED BY

W. H. WILLIS,

ATTORNEY AND SOLICITOR,

OFFICES:

Willis Bldg., 312 Indiana Ave. and Winder Bldg.,
WASHINGTON, D. C.

CLAIMANT'S AFFIDAVIT.

State of North Carolina, County of Stratford, ss:

In the matter of Fletch Vann, alias Eliza Boggs, widow of Moses Vann, alias Samuel Boggs, Co. G. 38th Regt, U. S. Col. Troops

ON THIS 26th day of December A. D. 1899, personally appeared before me a

Superior Court Clerk in and for the aforesaid County, duly authorized to administer oaths

Fletch Vann age 50 years, whose Post Office address is

Winston, N. C.

who being duly sworn, declares in relation to said case as follows: That she has no real property

[NOTE.—Affiants should state how they gain a knowledge of the facts to

whatever, That she has no personal property, except
[which they testify.]

1 Horse and eight pigs, that she owns no other
property whatever and that no one is legally bound
to give her any support and that her only in-
come is what she derives from her own labor.



A. T. Beverly

John W. Vann
[If affiant signs by mark, two persons who can write must sign here.]

Fletch Vann
[Signature of affiant.]
mark

Statement.

STATE OF South Carolina, COUNTY OF St. Lucie, ss.

Sworn to and subscribed before me this 26th day of December A. D. 1899, by

above-named affiant, and I certify that I read said affidavit to said affiant, including the words _____

erased, and the words _____

added, and acquainted _____ with its contents before

executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that she is a credible person.
[he or she is a]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

J. F. Newson

[Official Signature.]

Clerk Superior Court

[Official Character.]

If certificate on file, so state. St. Lucie County,
Winton, N. C.

This affidavit may be executed before a Notary Public, Clerk of the Court, Justice of the Peace, or any other officer duly authorized to administer oaths for general purposes. If the officer before whom this affidavit is executed is not required by law to use a seal, his official character and signature must be certified by the proper State, County, or City Officer under his official seal. If a certificate as to official character, signature, and term of office has been filed in the Bureau of Pensions for general reference, all that is necessary is to have it referred to. One such certificate is all that is necessary during the officer's term of office.

Division.

No. _____

ADDITIONAL EVIDENCE.

CLAIM OF _____

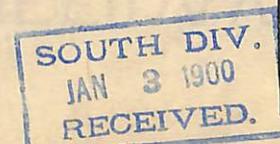
FILED BY

W. H. WILLS,
ATTORNEY AND SOLICITOR,

OFFICES:

WILLS BLDG., 312 Indiana Ave. and Water Bldg.,
WASHINGTON, D. C.

CROMWELL BROS., PRINTERS, 605 E ST., N. W.



CLAIMANT'S AFFIDAVIT.

State of ~~North Carolina~~, County of ~~Hertford~~, ss:
In the matter of ~~Fletcher Dunn, widow of Moses Dunn,~~
~~alias Samuel Boggs C. I. 38" H. S. C. I.~~

ON THIS 22nd day of January A. D. 1900, personally appeared before me a
Clerk Superior Court in and for the aforesaid County, duly authorized to administer oaths

Fletcher Dunn, age 50 years, whose Post Office address is
Winton, N.C.

who being duly sworn, declares in relation to said case as follows: *That Moses Dunn alias Samuel*

[NOTE.—Affiants should state how they gain a knowledge of the facts to

*Boggs was born in Winton, N.C. about the year A.D. 1841.
which they testify.]* *and also from family records*
as appears from the tax list on file in the Register's Office, it
further appearing that he enlisted in the U.S. Army August
6th 1864 and give his age 20 years. His occupation that
of labour and residence Hertford County, Straight
5 feet 6 1/2 inches. Complexion dark. Eyes black. Hair
black. A scar on his foot from an eye cut when
young the only permanent mark on his person.
After his discharge he returned to this his native
County & resided here until his death.

X Winton is 1/4 of Hertford Co.

A. J. Beverly
J. P. Parker

[If Affiant signs by mark, two persons who can write must sign here.]

Fletcher Dunn
mark
Signature of Affiant]



STATE OF *South Carolina*

COUNTY OF *Hartford*

, ss:

Sworn to and subscribed before me this

22nd

day of

January

A. D. 1900, by

above-named affiant, and I certify that I read said affidavit to said affiant, including the words

erased, and the words

added, and acquainted

her

with its contents before

she executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that *she is a* credible person.

[he or she is a]

Affiant's credibility must be certified to in the handwriting of the officer by whom the paper is executed.

Geo F. Newsom

[Official Signature.]

Clerk Superior Court

[Official Character.]

If certificate on file, so state.

This affidavit may be executed before a Notary Public, Clerk of the Court, Justice of the Peace, or any other officer duly authorized to administer oaths for general purposes. If the officer before whom this affidavit is executed is not required by law to use a seal, his official character and signature must be certified by the proper State, County, or City Officer under his official seal. If a certificate as to official character, signature, and term of office has been filed in the Bureau of Pensions for general reference, all that is necessary is to have it referred to. One such certificate is all that is necessary during the officer's term of office.

DIVISION.

No.

ADDITIONAL EVIDENCE.

CLAIM OF

FILED BY

W. H. WILLS,
ATTORNEY AND SOLICITOR,
OFFICES:

Wills Bldg., 312 Indiana Ave. and Water Bldg.,
WASHINGTON, D. C.

June 2, 1934

MBA-Cb

Mr. Armston Vann
216 Lee Street
Suffolk, Virginia

VANN, Fleter
WC-522 920

Dear Sir:

This is in reply to your letter of May 25, 1934.

The statutory allowance on burial expenses is payable only in cases of honorably discharged soldiers of a war.

The file shows that an award of \$34.80, covering accrued pension due in the case of Fleter Vann, deceased, was forwarded for payment in your favor.

As accrued pension is the only amount available to be applied on burial expenses of a deceased pensioner who was not a soldier in any war, the award in your favor represents the only amount due and payable on the burial expenses of Fleter Vann.

All future communications relative to this case should bear the pensioner's name and refer to the number WC-522 920.

Respectfully,

E.W. MORGAN
Director
Widows' and Dependents'
Claims Service

Q.W./eod

May 2, 1934.

Armston Vann
216 Lee St.,
Suffolk, Virginia.

VANN, Fleter
WC 522 920

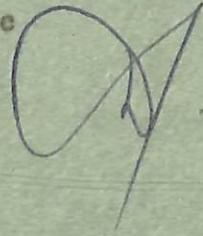
Sir:

XXXXXX

XXXXXX accrued pension

you.

610 mv/ejc

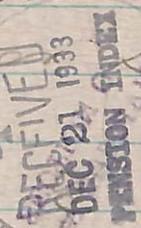
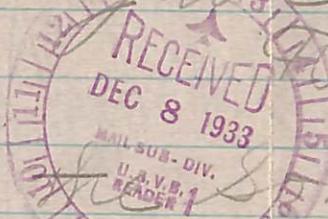
A handwritten signature in black ink, appearing to read "Armston Vann".

Verify

216 Lee St Suffolk Va.

Dec 10th 1933

Veterans Administration
Washington D.C.



Yann the Service closed
File for information whether or not
I furnished a certain amount
of money for burial expenses
the last month of mother's life
She died just two(2) days
before her check reached me
& had her check sent back
from the post office Suffolk
on the 1st day of Dec.
1933 when I hope received in
Suffolk as this left me with
the burial at this time with
a small amount of money

RECEIVED
FEB 12 1934
W.D.C. LIBRARY
SECTION OF
WORLD SUBDIVISION

RECEIVED
FEB 14 1934
U.S. LIBRARY
SECTION OF
WORLD SUBDIVISION



2
would be glad to hear from
you at once and know just
what you would be could do
with this Walter Name -

Walter Name No of your pension
Certificate (522920) my Name
is on the Certificate would
be glad to hear from you at once
respectfully

Armstrong Name
216 Lee st Sag Harbor

Son of the deceased

Walter Name

Moses

4-38 USCG

WC 577970



W. & D. CLS SERVICE
RECEIVED
FEB 12 1934
WIDOW SUBDIVISION
SECTION O

February 14, 1934

Mr. Armston Vann,
216 Lee Street,
Suffolk, Va.

FLETTER, Vann
W. C. 522,920

Dear Sir:

December 19, 1933.

Under existing legislation claim must be filed within one year from the date of the pensioner's death, or no payment may be made.

1 Encl.
Form 5036.

MV:JHM

M

April 9, 1934

MBA-Cb

Mr. Armston Vann
216 Lee Street
Suffolk, Virginia

VANN, Fletcher
WC-522 920

Dear Sir:

Reference is made to your claim for reimbursement from accrued pension in this case.

The enclosed Form 5328 should be signed by Arzular Thomas and returned.

All future communications relative to this case should bear the pensioner's name and refer to the number WC-522 920.

Respectfully

E. W. MORGAN
Director
Widows' and Dependents'
Claims Service

Encl.
Form 5328

ML:mf

H. A. WARREN, M. D.

PHONE 1146

PHYSICIAN AND SURGEON

Fleter Vann,
W. C. 522,920.

PHOENIX BANK BLDG.

EAST WASHINGTON ST.

SUFFOLK, VA. 12-20-33

I received from Mr. Armston Vann (\$25.00)
twenty-five dollars for medical service for
the decease Fleter Vann.

H.A. Warren M.D.



Fleter Vann
W.C. 522,920

T. E. COOKE CO.

361 EAST WASHINGTON

PHONE 899

SUFFOLK, VIRGINIA,

Dec 10X 1933

The undersigned hereby authorize T. E. Cooke Co., to furnish the following Merchandise and Professional Services in connection with the funeral of

Mrs Fleter Vann

Casket	<u>#3700. 1/2 lunch</u>	1 40.00
Vault or Box		8.00
Embalming		15.00
Burial Suit or Dress		10.00
Burial Shoes		
Funeral Car	<u>48 miles</u>	15.00
Automobiles @ \$ 750	<u>48 miles</u>	15.00
TOTAL		<u>203.00</u>

EXTRAS:

Ambulance	
Transferring Body	
R. R. Fare	
Cemetery Charges Lot \$	
Telegram and Telephone Calls	
Minister	
Flowers	
TOTAL	

Credit by Deposit on Selection

Net Balance Due

This Bill was Paid By
Armston Vann. T. E. Cooke Manager

TERMS:—A discount of _____ % will be allowed if paid on or before _____

Interest at 6% per annum from

19

I (or we) hereby represent that I (or we) have sufficient assets legally available to said T. E. Cooke Co., for the payment of the afore mentioned sum, and hereby covenant and agree to make payment within 30 days.

Signed.

Armston Vann



1934-55

VETERANS ADMINISTRATION

WASHINGTON



W. C. 522,920, Vann, Fleter

In reply refer to: MBA-Cb

REIMBURSEMENT WAIVER

I certify that I hold Armston Vann.....

responsible for the payment of any portion of the accrued pension to which I
may be entitled for services rendered, supplies furnished, or money expended
during the last sickness and burial of Fleter Vann.....
late a pensioner under certificate No. WC-522-920.....

(This need not be sworn to.)

Angular Thomas ✓



FLETTER, Vann
W. C. 522,920

VETERANS ADMINISTRATION
Pension Form 5036
Rev. Mar., 1932

READ THE INSTRUCTIONS ON BACK OF THIS BLANK BEFORE USING IT

APPLICATION FOR REIMBURSEMENT

This form not to be used if the deceased pensioner left a widow or minor children under sixteen years of age

STATE OF Virginia }
COUNTY OF Suffolk }ss:

On this 24th day of March, A. D. 1934, before me, the undersigned, personally appeared Armston Vann, aged 47 years, a resident of 216 Lee Street, Suffolk, Nansemond County of Virginia, State of Virginia, who makes the following declaration as an application for, and claim is hereby made for, reimbursement from the accrued pension for expenses paid (or obligation incurred) in the last sickness and burial of Fleter Vann, who was a pensioner of the United States by certificate No. 522,920, and who DIED November 29th, 1933, at Suffolk, Va. and was buried at Hertford County, near Winton, N. C. Nov. 3rd, 1933.

That the answers to questions propounded below are full, complete, and truthful to the best of my knowledge, information, and belief, and that no evidence necessary to a proper adjustment of all claims against the accrued pension is suppressed or withheld.

1. What was the full name of the deceased pensioner? Fleter Vann

2. In what capacity was decedent pensioned? (As soldier or sailor, or as a widow, minor child, dependent relative, etc.)

As widow of Moses Vann alias Samuel Boggs, Pvt. Co. G, 38 Regt. U. S. Cst. Vol. Inf.

3. If decedent was pensioned as a soldier or sailor—

(a) Was he ever married? (Answer yes or no.) ---

(b) How many times, and to whom? ---

(c) If married, did his wife survive him? (Answer yes or no.) ---

(d) If so, is she still living? (Answer yes or no.) ---

(e) If not living, give full names and dates of death of all wives. ---

(f) Was he ever divorced? (Answer yes or no.) ---

(g) If so, is the divorced wife still living? (Answer yes or no.) --- (If living, a copy of the decree of divorce must be filed.) ---

(h) If not living, give her full name and the date of her death. ---

4. Did pensioner leave a child under 16 years of age? (Answer yes or no.) No.

5. Is any such child still living? (Answer yes or no.) No.

6. Were any sick or death benefits paid on pensioner's account? If so, give name of society and amount paid. No.

7. Was there insurance (life, accident, or health) in force on life of pensioner at time of death? (Answer yes or no.) No.

8. If so, give the name of each company in which a policy was carried and the amount in which each policy was written. ---

9. Who was the beneficiary named in each policy? ---

10. What was the relation of each beneficiary to the pensioner? ---

11. Were the premiums paid by the deceased pensioner? ---

12. If not paid by the deceased pensioner, state the amount of premiums paid by each person who made payment on that account. ---



13. Is there an executor or administrator, or will application be made for appointment of any person as administrator? NO.

14. Did the deceased pensioner leave any money, real estate, or personal property? NO.

15. If so, state the character and value of all such property. None.

16. What was the assessed value (last assessment) of the real estate? Nothing.

17. How was the pensioner's property disposed of? None.

18. Did pensioner leave an unindorsed pension check? (Answer yes or no.) NO

19. What was your relation to the deceased pensioner? Her son

20. Are you married? (Answer yes or no.) Yes.

21. What was the cause of pensioner's death? Old age infirmities

22. When did the pensioner's last sickness begin? Feeble since/ and in bed since Nov. 1st, 1933.

23. From what date did the pensioner become so ill as to require the regular and daily attendance of another person constantly until

death? Nov. 1st, 1932.

24. Give the name and post office address of each physician who attended the pensioner during last sickness Dr. H. A.

Warren, Suffolk, Va.

25. State the names of the persons by whom the pensioner was nursed during the last sickness. Arzular Thomas, her daughter.

26. Where did the pensioner live during last sickness? R. R. Avenue, Suffolk, Va.

27. Has there been paid, or will application be made for payment to you or any other person, any part of the expenses of the pensioner's last sickness and burial by any State, county, or municipal corporation? (Answer yes or no.) No.

28. Has there been or will there be an application filed in the Veterans Administration for a burial allowance? Yes, unless it can be paid under this application.

The following is a complete statement of all the expenses of the last sickness and burial of said deceased pensioner:

(Each charge entered below should be supported by an itemized bill of the person who rendered the service or furnished any supplies for which reimbursement is demanded and should show, over his signature, by whom paid, or who is held responsible for payment, and contain the name of the pensioner for whom the expense was incurred or service rendered. If no charge was made for any item, that fact should be indicated.

That of the above-mentioned expenses this claimant has paid, or guaranteed the payment of, the following items: All have been paid as per receipts attached. Her pension certificate is now in the possession of Armston Vann.

Amston Vanu
(Clement's signature in full)

216 Lee Street, Suffolk, Va. (P. O. address)

(When the claimant for reimbursement is a married woman, she is required to sign the application with her own full name, not using the Christian name or the initials of her husband, and all bills should be received to her in her own name.) 15-502

Also appeared Clarence Langston and Henry Collins
 who, being duly sworn, make the following statement, each for himself, that they know the claimant herein and that their answers to the following questions are true:

1. Did pensioner (if a soldier or sailor) leave a widow or a minor child under age of sixteen years surviving? She was a widow.
2. When did the pensioner die? Nov. 29th, 1933.
3. Did pensioner leave any property? If so, state its character and value No.
4. Our means of knowledge of the above statements made by us are: We knew the deceased pensioner for 1 years and 15 yrs and have been living in touch with her during that time.

Name Clarence Langston Name Henry Collins
 P. O. Address 112 Lee St. Suffolk, Va. P. O. Address 212 Lee St. Suffolk, Va.
 Subscribed and sworn to before me, this 26th day of March A. D. 1934;
 and I certify that the contents of the foregoing application were fully made known and explained to the claimant and witnesses before swearing, that I have no interest, direct or indirect, in the prosecution of this claim, and I further certify that the reputation for credibility of the witnesses whose signatures appear above is good

H. E. Macleamy
Attorney (Signature)
McLammy & Webb (Official Contractor)
110 W. Jones Ave, Suffolk, Va. (P. O. address)

STATEMENT OF ATTENDING PHYSICIANS

Give pensioner's name in full Fleter Vann
 Give date of commencement of pensioner's last sickness Nov. 1st, 1933, severely.
 Give date of pensioner's death Nov. 29th, 1933.
 From what date did the pensioner require the regular and daily attendance of another person constantly until death? Nov. 1st, 1933.

During what period did you attend the pensioner? From Nov. 1st, 1933 until Nov. 29th, 1933.

State nature of disease from which pensioner died Aortic Stenosis and Dysentery

Give name of any other physician who attended the pensioner in last sickness No other physician.

Does your bill include a charge for all medicine furnished the pensioner during last sickness? Yes.
 Has your bill been paid; if so, by whom? Yes. By Armston Vann.

Give the name of each person who acted as nurse, and mention any other facts within your knowledge which would be helpful in adjusting this claim for reimbursement: Arzular Thomas, her daughter and her son Armston Vann,

I certify that the foregoing statement is correct.

April 2nd, 1934., 19

, 19

H. G. Warren M.D.
Attending Physician.

Attending Physician.

NOTICE

The only sum available for payment of a claim presented on this blank is the pension unpaid at the date of the pensioner's death.

The Act March 2, 1895 (28 Stat. L., 964), provides—

That from and after the twenty-eighth day of September, eighteen hundred and ninety-two, the accrued pension to the date of the death of any pensioner, or of any person entitled to a pension having an application therefor pending, and whether a certificate therefor shall issue prior or subsequent to the death of such person, shall, in the case of a person pensioned, or applying for pension, on account of his disabilities or service, be paid, first, to his widow; second, if there is no widow, to his child or children under the age of sixteen years at his death; third, in a case of a widow, to her minor children under the age of sixteen years at her death. Such accrued pension shall not be considered a part of the assets of the estate of such deceased person nor be liable for the payment of the debts of said estate in any case whatsoever, but shall inure to the sole and exclusive benefit of the widow or children. And if no widow or child survive such pensioner, and in the case of his last surviving child who was such minor at his death, and in case of a dependent mother, father, sister, or brother, no payment whatsoever of their accrued pension shall be made or allowed except so much as may be necessary to reimburse the person who bore the expense of their last sickness and burial, if they did not leave sufficient assets to meet such expense.

The Act March 3, 1905 (33 Stat. L., 1169), provides—

* * * and no part of any accrued pension shall hereafter be used to reimburse any State, county, or municipal corporation for expenses incurred by such State, county, or municipal corporation under State law for expenses of the last sickness or burial of a deceased pensioner.

INSTRUCTIONS

1. Accrued pension is not a part of the assets of the estate of a deceased pensioner, nor liable for the payment of the debts of such pensioner.

2. Accrued pension is not payable as reimbursement in the case of a person pensioned on account of service if a widow or minor child under sixteen years of age survive.

3. Accrued pension is not payable as reimbursement in the case of any pensioner who left sufficient assets to meet the expense of last sickness and burial.

4. Application for reimbursement should be accompanied by the following evidence:

(a) *Bills of all expenses of last sickness and burial.*—If paid by the claimant for reimbursement the bills must be properly received by said claimant; but if paid in part only the creditor should state by whom paid or from what source such payment was received. If unpaid, the parties to whom said bills are due should note on each bill, over their signatures, that they hold the claimant responsible for the payment. If the bill be for medical treatment it must show the dates of visits or treatment and the charge for each. A bill for nursing and care must show the dates between which the services were rendered, and the rate per day or week. The bill of the undertaker must be itemized, and show the date on which the services were rendered.

Each bill must show that the service was rendered for the pensioner on account of whom reimbursement is claimed.

All claims should be presented in the name of one person.

Bills which are forwarded become a part of the records of the Veterans Administration and can not be returned.

Claimants should therefore secure duplicates of such bills if needed by them.

(b) *The pension certificate which was issued in the name of the pensioner.*—If such certificate is not in possession of the claimant a statement showing its whereabouts or final disposition should be made.

5. The claimant's statement relative to insurance, property, and whether the deceased pensioner left a widow or minor children under sixteen years of age should be corroborated by the testimony under oath, of two disinterested creditable witnesses who have personal knowledge of the facts.

15-502

U. S. GOVERNMENT PRINTING OFFICE: 1933



VETERANS ADMINISTRATION

ACCRUED PENSION REIMBURSEMENT

MAY 8 - 1934

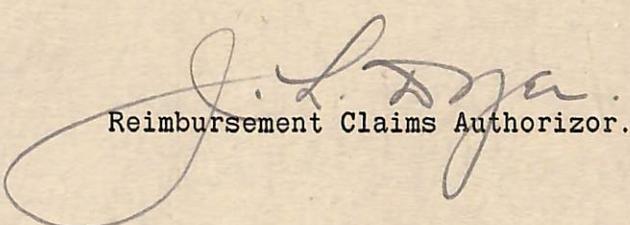
MCC-Cb

Director of Finance

You are hereby directed to pay \$34.80 pension, accrued in the case of
Fleter Vann - act # 5-23-28

pensioned by Cert. No. WC-522920 Group W, who died 11-29-33
to Armstrong Vann - 216 Lee St.
Suffolk Va.

as reimbursement of the expenses of the pensioner's last sickness and burial.


Reimbursement Claims Authorizer.

REIMBURSEMENT

ACCRUED PENSION

Claimant Amerson Varn
Street and No. 216 Lee St.
P. O. Suffolk
State Va

Pensioner Elter Varn ✓
Class Widow ✓
Law 5-23-28 ✓
Section W. ✓

Rate, \$ 40 00 Last paid to 10-31-33 at \$ 36 50 ✓

Last illness commenced _____ Date of death 11-29-33 ✓ Accrued pension, \$ 34.80

AMOUNTS CLAIMED		CHARGES APPROVED		DEDUCTIONS	
Physician's bills	\$	\$ <u>25 00</u>		State aid	\$ <u>none</u>
Medicine				Assets	"
Board				Insurance	"
Nursing and care				Amount waived	
Rent					
Living expenses for pensioner					
Undertaker's bill		<u>203 00</u>			
Livery					
Cemetery charges					
OTHER EXPENSES				TOTAL	
				SUMMARY	
				Charges approved	\$ <u>228 00</u>
				Deductions	"
				Amount approved	<u>228 00</u>
TOTALS		<u>228 00</u>			

Approved for 34.80 ✓

6-2-1934

Dail
Reimbursement Claims Adjudicator.

MAY 8 - 1934

J. L. Dyer
Reimbursement Claims Authorizer.

DROP REPORT--PENSIONER

FLETTER VANN,
SUFFOLK VA
522920 JUNE WID

Cert. No.

Pensioner

Soldier

Service

Class

Remarks

NOV 30 1933

Canceled (payee deceased)

ACCOUNTING DIVISION

DEC 6 - 1933, 193

The name of the above-described pensioner

who was last paid at the rate of \$ 36

per month to OCT 31 1933, 193

has this day been dropped from the roll be-

cause of DEATH NOV 27 1933
29

Vet. Adm.

Wm. H. HOLMES,

Fin. Form 1411

Chief Accounting Division.

Rev. Mar. 1932

By



Vet. Adm.

Form 3708-Rev.

MAIL ROUTING SLIP

January 1934

Board of Veterans Appeals

Medical and Hospital Service

Office of the Solicitor

Investigation Division

Law Division

Legislation & Regulations Division

Insurance Service

Life Insurance Claims Division

Office of the Chief

Converted Insurance Subdivision

Term Insurance Subdivision

Senior Administrative Assistant

Claims Review Board

Adjustment Service Unit

Adjudication Group

1 2 3 4 5 6

Policy Issue: Retirement & Records Div.

Issue Section

Service Application Section

Insurance Claims Council

Office of the Chief

Adjudication Unit

Preparation Unit

Converted Unit

Term Unit

Adjustment Service Unit

Veterans Claims Service

Office of the Director

Rating Schedule Board

Field Supervision Division

Case Review Subdivision

Claims Division

Office of the Chief

Central Rating Board

Authorization Subdivision

Special Authorization Group

Authorization Group

1 2 3 4 5 6 7 8

Service Subdivision

Awards Typing Unit

Widows & Dependents Claim Service

Authorizing Division

Adjudicating Division

Widow Subdivision

A B C D E F G H I J

Reimbursement Subdivision

Reimbursement Group

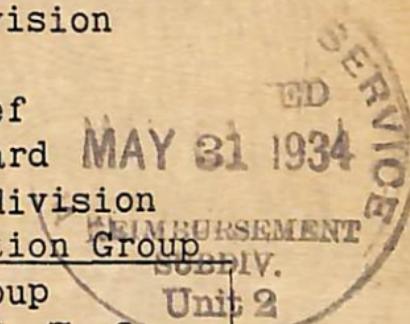
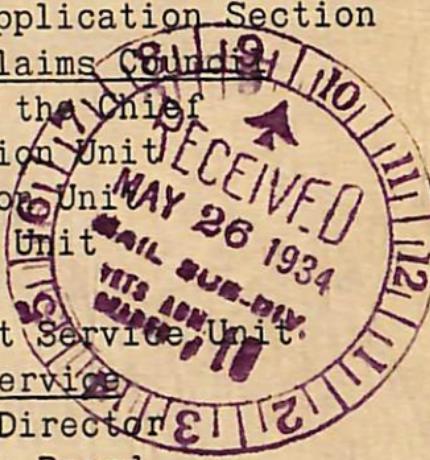
1 2 3 4 5

Cen. Comm. on Waivers & Forfeitures

Index Subdivision

Veterans Records Subdivision

Decentralization Section





West & Withers
Suffolk, Virginia

Fire, Automobile,
Windstorm, Business
Interruption (U. & O.),
Rent and Rental Value,
Leasehold, Sprinkler
Leakage, Explosion,
Inland Transportation
& Special Covers, Riot,
Personal Effects and
Tourists Baggage, Furs,
Salesman's Samples,
Fine Arts, Radium,
Ocean Marine, etc.

May 25, 1934



Veterans Administration Bureau,
Washington, D. C.

Dear Sirs:

This pensioner died ~~May 29th 1934~~ and
as her son I desire to put in a claim for burial allowance.

Kindly forward necessary papers, and oblige,

Yours very truly,

WEM/S

Amstrong Vann
216 Lee Street
Suffolk, Va.





NEW YORK UNDERWRITERS
INSURANCE COMPANY

WEST & WITHERS
Agents
117 N. Main St.
SUFFOLK, VA.

RETURN AFTER FIVE DAYS



26
5

Veterans' Administration,
Washington,
D.C.