

Soldier's Application for Pension

I, James S. Ellington

am a citizen of Kentucky, resident at Morefield in the County of Nicholas

in said State of Kentucky, and was a soldier from the State of Kentucky, in the war between

the United States and the Confederate States and I do hereby apply for aid under the Act of the General Assembly of

Kentucky, entitled "An Act granting pension to disabled and indigent Confederate soldiers." And I do solemnly swear

that I was a member of Company "B" 1st Battallion, Kentucky,

Mounted Riflemen

in the service of the Confederate States, and that by reason of disability and indigence I am now entitled to receive the

benefit of this Act. I further swear that I do not receive aid or pension from any other State, or from the United States,

and that I am not an inmate of any soldier's home, and that I am unable to earn a reasonable support for myself and fam-

ily. I do further solemnly swear that the answers given to the following questions are true:

In what County, State and year were you born?
Answer Morgan County, Kentucky, February 20th 1833.

When did you enlist and in what command? Give the names of the regimental and company officers under whom you served?

Answer December 13th 1861 at Prestonburg Marshall's Command, Major Shawhan's Battallion, Captain J. M. Thomas' Company

How did you get out of the army, when and where?

Answer Honorably discharged at Castle Woods Va. day of _____ 1862, (Discharge Papers Lost.)

Were you ever in prison? If so, state what prison and when released.

Answer No.

Were you paroled? If so, when and where?

Answer No.

Did you take the oath of allegiance to the United States Government?

Answer Yes.

If so, when and under what circumstances?

Answer In the year 1865, was arrested, taken to Mt. Sterling, Ky., and there took oath. (Arrested by "Home Guards" after discharge)

In what business are you now engaged, if any, and what do you earn?

Answer *Am. engaged in no business on account of blindness and other disabilities and earn nothing*

What estate have you in your own right, real and personal, and what is its actual cash value?

Answer *Life estate in 3.7 acres of land, which life estate is worth less than \$250.00 and no personal property.*

What estate has your wife in her own right, real and personal, and what is its actual cash value?

Answer *none (dead)*

State the net income of yourself and your wife from all sources for the past year. This must include all money received either from wages, rents or interest on loaned money, if any.

Answer *about \$75.00*

Do you use intoxicants to any extent?

Answer *no*

How long and since when have you been an actual resident of the State of Kentucky?

Answer *Ever since birth*

Have you an attorney to look after this application?

Answer *no*

If so, give his name and address?

Answer *✓*

Witness my hand this *13* day of *April* 191*2*

WITNESSES:

at test: Jas. F. Sugg James S. Ellington
mark
P. O. *Moorefield, Ky.*

C. W. Kash, Physician Postoffice Address *Carlisle Ky.* Street and No. (if any)

P. W. Duncan, Witness R. F. D. (if any) *no. 1-*

Postoffice Address *Myers Ky. R.D. #1*

W. W. Huffstetter, Witness

Postoffice Address *Carlisle, Ky. R.D. #1*

STATE OF KENTUCKY

Nicholas County } I, *M. M. Keen* Judge of said County,

certify that *Jas. S. Ellington* and his wife *is dead* *is* *are*

assessed with *3.7* acres, valued at \$ *1035*, and with \$ *no* of personal property.

Witness my hand this *13* day of *April*, 191*2*

M. M. Keen Judge County Court.

If applicant and his wife have no property, the Judge must so certify.

STATE OF KENTUCKY

Nicholas Court Clerk } Personally appeared before me... A County... of said County, the above named James S. Ellington the applicant, with whom I am personally acquainted, and having the application read and fully explained to him, as well as the statements and answers therein made, made oath that the said statements and answers are true.

Witness my hand and seal of office, this... 13th day of April, 1912 Jno. F. Sugg, Clerk.

STATE OF KENTUCKY

Nicholas Court Clerk } Personally appeared before me... A County... of said County, the above named C. W. Nash one of the subscribing witnesses to the foregoing application, and who is a physician of good standing, and being duly sworn says that he has carefully and thoroughly examined James S. Ellington the applicant, and find him laboring under the following disabilities: Unable to earn a support by manual labor.

Total blindness and disabled in right arm and hand.

Witness my hand and seal of office, this... 13th day of April, 1912 Jno. F. Sugg, Clerk.

(If possible, the two witnesses as to character should have served with the applicant in the army, and if so, let them, or either, state it in their oath; also any other information regarding applicant's army service.)

STATE OF KENTUCKY

Nicholas Court Clerk } Personally appeared before me... A County... of said County, the above named J. W. Duncan and W. W. Huffstetter, two of the subscribing witnesses to the foregoing application, with whom I am personally acquainted, and known to me to be citizens of veracity and standing in this community, and who make oath that they are personally acquainted with the foregoing applicant, and that the facts set forth and statements made in this application are correct and true, to the best of their knowledge and belief, and that they have no interest in this claim, and that said applicant's habits are good and free from dishonor. And they further make oath to the following facts touching the applicant's service in the Confederate army.

State here what witnesses know of their own knowledge. That they were in his company and know him to be a trustworthy citizen; that he was a faithful soldier and always at his post of duty. And Mr. J. W. Duncan further states that he was by the side of said applicant when same was wounded and disabled for life.

Witness my hand and seal of office, this... 13th day of April, 1912 Jno. F. Sugg, C. N. C. C.

No. 1078

STATE OF KENTUCKY

Soldier's Application for Pension

James S. Ellington

Co. Rgt.

Filed JUN 17 1912

Allowed

Read Specifications on Back.

- SPECIFICATIONS
- 1.
 - 2.
 - 3.
 - 4.
 - 5.

W. J. Stone Commissioner

All blanks on this filing to be filled by the Pension Board
KENTUCKY STATE JOURNAL PUBLISHING CO., FRANKFORT, KY

To Applicants for Pension

The material facts to be proven in the pension claim, under the laws of the State of Kentucky, are as follows:

- 1. Service in army.
- 2. Present Disability.
- 3. Indigency.
- 4. How you got out of the Army.
- 5. Character as a Soldier and Citizen.
- 6. Applications will not be filed unless certificates of Doctor and County Judge are filed out.

- 1. May be proven by officers or comrades.
- 2. May be proven by physician's certificate.
- 3. May be proven by neighbors and by certificate of County Judge.
- 4. May be proven by filing parole or discharge, or in case these have been lost or destroyed, by officers or comrades who know the facts.
- 5. May be proven by comrades and citizens.

ADJUTANT GENERAL'S OFFICE

JUN 19

1925991

1912

WAR DEPARTMENT

Address: "The Adjutant General,
War Department, Washington, D. C."
1925991

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE,

WASHINGTON, June 20, 1912.

Respectfully returned to the

Examiner,
Confederate Pension Department,
Frankfort, Kentucky.

The records show that James S. Ellington, private, Company B, 1st Battalion Kentucky Mounted Rifles, Confederate States Army, enlisted December 13, 1861; that he was transferred to Company E, 3d Battalion Kentucky Mounted Rifles, Confederate States Army, and that he was discharged December 19, 1862. No later record of him has been found.

Henry P. McCain
Adjutant General.

James S. Ellington
Enlisted Dec: 31st 1861
Co: B. 1st Bat Ky Mt Rifles
Discharged Dec 19th 1862
having been wounded in
service rendering him
unfit for further Army
service.

*Proven by Record and
Comrade*

Property \$1035.⁰⁰

No. _____ S _____

HEADQUARTERS

Confederate Pension Department

W. J. STONE, EXAMINER

FRANKFORT, KY,

June 17th, 1919

GEN. W. P. HALL,
Adjutant General, U. S. A.,
WASHINGTON, D. C.

Dear Sir:

James S. Ellington,

who is an applicant for Pension under the Kentucky Pension law, claims
to have been a member of Company "B" - 1st. Battalion

Regiment Ky. Mounted Riflemen. C. S. A., and to have been

Enlisted Dec. 13, 1861 at Prestonsburg,

Marshall's command, Major Shawhan's Bat.

Capt. J. M. Thomas' company.

Never in prison.

Please give me the record of this soldier.

Respectfully,

W. J. Stone

Examiner.

State of Kentucky

Adjutant General's Department.

Frankfort, Ky., 19

SIR:

The within account is respectfully returned with the re-
quest that same be executed upon the attached form, in dupli-
cate, and forwarded to

at _____, Ky., for his certifi-
cate.

I recommend that this
claim be allowed.

J. Handy Ellis

Adjutant General.

Allowed by the State
Pension Board.

James P. McCreary
Chairman.

Very respectfully,
PHILIP P. JOHNSTON,
Adjutant General.

STATE OF KENTUCKY, }
Nicholas County Court. }
Sct.

I, Jno. F. Sugg, Clerk of the County Court for the County and State aforesaid, do hereby certify that the foregoing application for Pension of James S. Ellington was on the 13th day of April, 1912, filed in my office, together with a complete and correct duplicate of same, and the same was at the May Term, 13th day of May, 1912 continued for exceptions, and none having been filed thereto, the same was, at the June Term, 10th day of June, 1912, produced in open Court and evidence taken on same as per the Judge's certificate hereto attached.

Given under my hand and seal of office this 10th day of June 1912.
Jno. F. Sugg Clerk Nicholas County Court

STATE OF KENTUCKY, }
Nicholas County Court. }
Sct.

June Term
10th day of June 1912

I, N. H. McNew, Judge of the Nicholas County Court, do hereby certify that the foregoing Application for Pension of James S. Ellington was at the above Term produced in open Court and upon testimony of James Mitchell, of Leaslie, Kentucky, and W. E. Ellington, of Moorefield, Kentucky, I find that said applicant has been a Bona-fide citizen of Kentucky for more than 25 years, last past, that he resides at moorefield, Nicholas County, Ky.; that he has no means of support except those stated in said application and his own labor. And I hereby recommend that the same be allowed; all of which together with said application is hereby certified to the Adjutant General of the State of Kentucky.

Given under my hand this the 11th day of June 1912.
N. H. McNew Judge Nicholas County Court

Commonwealth of Kentucky
STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

1 PLACE OF DEATH
County *Nicholas*

Vot. Prec. *Burgess Post*

Ino. Town *Grant Ky*

City *Grant*

Registration District No.

Primary Registration District No.

(No.) St., Ward

File No.

Registered No.

[If death occurred in a hospital or institution, give its NAME instead of street and number.]

2 FULL NAME *James S. Ellington*

PERSONAL AND STATISTICAL PARTICULARS

3 SEX *Male* 4 COLOR OR RACE *White* 5 SINGLE MARRIED WIDOWED OR DIVORCED *Widowed*

6 DATE OF BIRTH *Feb. 20, 1833*

7 AGE *87* yrs. *10* mos. *26* ds. IF LESS than Day... hrs. or... min.?

8 OCCUPATION (a) Trade, profession, or particular kind of work. (b) General nature of industry business or establishment in which employed (or employer) *Farmer*

9 BIRTHPLACE (State or country) *Morgan Co. Ky.*

10 NAME OF FATHER *Geo. Ellington*

11 BIRTHPLACE OF FATHER (State or country) *Ky.*

12 MAIDEN NAME OF MOTHER *Not known.*

13 BIRTHPLACE OF MOTHER (State or country) *Ky.*

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) *W. E. Ellington*

(Address) *Moorefield Ky.*

15 Filed *191*

REGISTRAR

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH *Jan. 16th, 1921*

17 I HEREBY CERTIFY, That I attended deceased from *12-23, 1920* to *1-16, 1921*, that I last saw him *live* on *1-15, 1921* and that death occurred on the date stated above at *6.9* a.m. The CAUSE OF DEATH* was as follows:

Senility

(Duration) yrs. mos. ds.

(Signed) *A. P. Holmes*, M. D.

1-16, 1921 (Address) *Moorefield Ky.*

*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL or HOMICIDAL

18 LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS OR RECENT RESIDENTS)

At place of death yrs. mos. ds. In the State yrs. mos. ds.

Where was disease contracted, if not at place of death?

Former or usual residence

19 PLACE OF BURIAL OR REMOVAL *Issaquah Ky.* DATE OF BURIAL *Jan. 17, 1921*

20 UNDERTAKER *Mahrs Cotts & Co. Carlisle Ky.* ADDRESS

MARGIN RESERVED FOR ENDING

WRITE PLAINLY, WITH UNFADING INK--THIS IS A PERMANENT RECORD

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

1/18/21
Capt. W. J. Stone Frankfort
dear Capt. Stone father
(James S. Ellington)
died Sunday morning
Jan 16 1921 aged 88 yrs
W. E. Ellington
moorefield
1/8