

(ORIGINAL)

Questions for Applicant

STATE OF KENTUCKY,

Graves County.

Frances Price of said State and County, desiring to avail herself of the pension allowed to Indigent Widows of Soldiers, General Assembly, approved March 11, 1912, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your full name and where do you reside? (Give State, County and Postoffice.)

Frances Price Mayfield Ky R.F.D #12

2. How long and since when have you been a resident of this State? *77 years since 1835-Sept 19th*

3. When and where were you born and what was your maiden name? *Sept 19-1835 in Graves Co. Ky.*

My maiden name was Noel

4. When and where was your husband born—state his full name, and where were you and he married, and who performed the marriage ceremony. (If possible, attach certified copy marriage license in every case.)

about 1833 in Graves County Ky. Gideon Price was his name. we were married in Graves Co. Ky. by Bro. Wilkerson July 31st 1889 Graves Co. Ky

5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States?

I do not know

6. How long did your husband serve in said Company and Regiment?

I do not know

7. When and where did your husband's Company and Regiment surrender?

I do not know

8. Was your husband present at the time and place when his Company and Regiment surrendered?

I do not know

9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause and by what authority?

10. When and where did your husband die? *July 31st 1906 in Graves Co. Kentucky*

11. At the time of your husband's death, were you living with him as his lawful wife? *Yes Sir.*

12. Have you married since the death of your soldier husband? *No Sir.*

13. What property, real or personal, or income do you have or possess, and its gross value?

None except my wearing apparel.

14. Have you a family? If so, who compose such family? *I have no family.*

15. Name some friend, giving his name and postoffice address, who will be willing to have us write to him about your case if necessary.

John Bowen Poyorsburg Ky R.F.D No. 1.

Sworn to and subscribed before me, this, the *19* day of *June* 191*2*

S. Mason Clerk
of *Graves* County. Court
By *S. Mason* Clerk

Frances Price

Questions for Witnesses

STATE OF KENTUCKY,

Graves County.

G. J. Puryear of said State and County, having been presented as a witness in support of the application of Mrs. *Frances Price* for a pension under Confederate Pension Law, approved March 11, 1912, after being duly sworn, true answers to make to the following questions, deposes and answers as follows:

1. What is your name and what is your postoffice address? *Gabriel J. Puryear*
Mayfield Kentucky R.F.D. No. 7
2. Are you acquainted with the applicant, Mrs. *Frances Price*
If so, how long have you known her? *25 or 30 years*
3. Where does she reside, and how long and since when has she been a resident of this State? *Mayfield*
Kentucky R.F.D. No. 12. She was born and raised in Kentucky.
4. Were you ever acquainted with her husband? *Yes Sir.*
5. Were either or both of you present at the marriage? *I was not, but I know they lived*
as man and wife to his death.
6. How long did you know him? *Over Fifty years*
7. When and where did *Gideon Price* enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? *in 1864 he enlisted in*
Graves Co. Ky. in Co. B. 12th Ky. I was a member of the regiment.
8. Were you a member of the same Company and Regiment at the close of the war? *Yes*
9. How long did he perform regular military duty? *I dont know as I had been taken sick*
and was not with the Company at the time but think he staid to the
final surrender
10. When and where was his Company and Regiment surrendered? *I think it was disbanded*
at Jackson Tennessee.
11. Were you with the command when it surrendered? *I was not for reasons above stated.*
12. Was *Gideon Price* the husband of applicant, present?
I do not know for the reasons stated.
13. If not present, where was he? *I think he was with the dismounted part of the command*
14. When and where did he leave his command?
For what cause?
By whose authority did he leave?
- How do you know all this? (State fully and clearly.) *because I was in the same regiment*
and knew him before, during and after the war.
15. When and where did *Gideon Price* die? *about*
1906. I dont remember the exact date.
16. Where did he reside at his death, and how long had he been a resident of Kentucky at his death? *at his home*
near Obion Creek, in Graves County Ky. all his life.
17. Do you know of your own knowledge that applicant is the lawful widow of *Gideon Price*? *I think she is. She has*
lived near me, and I am sure she is.

18. Has she remained unmarried since her soldier husband's death, and is she now his widow? *Yes*

19. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?

I think she has no property

Has applicant conveyed any property, in the last two years or given any away, if so, what was it, and to whom?

None that I have heard of

NOTE.—Let the witness who can answer the greatest number of the questions do so; then let the other witness state in the space below how much of the testimony of the first witness he concurs in, and whether or not he can answer any of the questions not answered by the first witness.

J. W. Clapp was a member of Co. E. 12th Ky and know that Edeon Price was a member of the same regiment and endorse the statements of G. J. Puryear

Sworn to and subscribed before me this *11* day of *July* 191*2*

Ch. Mason Clerk
By *B. B. Carney, D.C.*

W. Clapp
G. J. Puryear
Witnesses.

THE FOLLOWING CERTIFICATE OF THE COUNTY JUDGE MUST BE FILLED OUT WHETHER THE APPLICANT OWNS ANY TAXABLE PROPERTY OR NOT.

I, *J. W. Mourse* Judge of *Graves* County, Kentucky, hereby certify that the property assessed on the tax books of this County to Mrs. *Frances E. Price* the widow of *has no property* amounts to \$ *no property listed* real estate and \$ *personal* personal *J. W. Mourse* Trustee. For *Judge of Graves* County, Ky.

Certificate of Clerk of Court or Notary Public

STATE OF KENTUCKY,

Graves County.

I, *Ch. Mason* Clerk or Notary Public, in and for said county, hereby certify that the applicant, Mrs. *Frances Price* resides in said county, and has been a bona fide resident of this State since the *19* day of *Sept.* *1835* 19*12*, and that the witnesses, Mr. *W. Clapp* and *G. J. Puryear* are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witness took the oath herem prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed.

Witness my hand and official seal this *17* day of *August* 191*2*

(SEAL)

Ch. Mason Clerk
By *Ch. Mason* County.

- Note—1. Before any questions are answered, the Clerk or Notary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so help you God."
- 2. Additional affidavits may be attached, if blank spaces are insufficient.
- 3. All affidavits must be made before an officer using a seal.
- 4. Only widows who were the wives of soldiers need apply—and are now widows. Those married since Jan. 1st, 1890, not entitled.
- 5. Two witnesses are necessary to make out claims.
- 6. Attach certified copy marriage license in every case, or certificate of County Court Clerk, under seal, that license is filed in his office duly certified by officiating minister, or the affidavit of the officiating minister, or the affidavit of a witness of the ceremony, or the affidavit of two witnesses who knew them as man and wife, prior to January 1, 1890, and knew that they were living together on the date of his death.

NOTICE TO APPLICANTS.

The Widows' Pension Law, passed by the Kentucky Legislature, provides for the widows of *soldiers only*, and they must have been residents of the State of Kentucky since January 1, 1907.

Widow must have married prior to 1890.

To be eligible the applicant must have remained a widow after the death of her soldier husband, and must be indigent.

Read the questions in the application carefully and answer them fully.

Read the law, and unless you come clearly under the laws it will be useless to file application.

No. 323

.....

**Widow's
Indigent Pension**

Name *Frances A. Price*.....

Filed **SEP 5 - 1912**.....

Widow of *Gideon Price*.....

FILED

JUL 15 1912

A. Mason
By *A. M. Mason*
CLERK

Approved Feb 25th 1913
W. J. Stone Examiner

All blanks on this filing to be filled by the Pension Board.

Indorsement

Confederate Pension Department

STATE OF KENTUCKY

FRANKFORT.

MRS. FRANCES PRICE,
widow of
GIDEON PRICE,

Enlisted Apr. 1, 1864, Co. B,
12th Kentucky Cavalry. Record
proof of service to June 1864.
One witness swears that he
was in the army and that he
served till the close of the
war.

Indigent.

W J Stone.

I recommend that this
claim be allowed.

J. Sandy Ellis
Adjutant General.

Approved by the State
Pension Board.

James B McHenry
Chairman.

No. _____ W _____

HEADQUARTERS

Confederate Pension Department

W. J. STONE, EXAMINER

FRANKFORT, KY.

SEP 5 - 1912 191

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

Dear Sir:

Mrs. *Frances Price*

who is an applicant for pension under the Kentucky Widows' Pension Law,
claims that her husband *Gideon Price*
was a member of Company *B* Regiment *12th Ky* C. S. A.,
and was _____

Please give me the record of this soldier.

Respectfully,

W. J. Stone
Examiner.

MARRIAGE CERTIFICATE.

This is to Certify, That on the 1 day of Sept ¹⁸⁸⁹ 190

the Rites of Matrimony were legally solemnized between

Gideon Price and *Frances Watts*

at *Ed Gregory's* residence in the County of *Graves*

in the presence of *Ed C. Gregory, M. J. Neighs* & others

NOTE.—The Statute requires the names of at least TWO
witnesses to be inserted in the foregoing Certificate.

(Signed)

J. A. Wilkerson M. G.

A Copy attest: *Ed Mason* Clerk Graves Co. Court
By *Ed Marns* J. C.

ADJUTANT GENERAL'S OFFICE

SEP -7

1951591

1912

WAR DEPARTMENT

1951591

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE,

WASHINGTON, September 9, 1912.

Respectfully returned to the

Examiner,
Confederate Pension Department,
Frankfort, Kentucky.

The records show that Gideon Price, private, Company B, 12th Kentucky Cavalry, Confederate States Army, was enlisted April 1, 1864. On the muster roll for May and June, 1864 (last on file), he was reported present. No later record has been found.

[Signature]
The Adjutant General.

(A.G.O.74)

Information
Confederate Pension Department
STATE OF KENTUCKY
FRANKFORT

MRS. FRANCIS PRICE
Widow of
GIDEON PRICE

Enlisted Apr. 1, 1864, Co. B,
12th Kentucky Cavalry. Records
proof of service to June 1864.
One witness swears that he
was in the army and that he
served till the close of the
war.

Indigent.

W. J. Stone.

I recommend that this
claim be allowed.

[Signature]
Adjutant General.

Approved by the State
Pension Board.

[Signature]
Director.

MARRIAGE CERTIFICATE

This is to Certify, That on the _____ day of _____ 1912
the rites of matrimony were legally solemnized between
[Signature] and *[Signature]*
at _____ in the County of _____
in the presence of *[Signature]*
[Signature]
NOTE - The State requires the names of at least TWO
witnesses to be inserted in the foregoing Certificate.
(Signed) *[Signature]*

VOUCHER

I, Make oath that I am the identical person named in pension Certificate No., dated, 1....., in my possession and now exhibited; that I come within the law upon which said certificate was issued; that I am entitled to and hereby make claim for the payment of THIRTY-SIX DOLLARS (\$36.00) pension now due, at the rate of twelve dollars per month, from AUGUST 1, 1927, to NOVEMBER 1, 1927.

and that my post-office address to which I desire the check in payment mailed is as follows:

INSTRUCTIONS TO OFFICER BEFORE WHOM THIS VOUCHER IS EXECUTED.
Pensioner's signature must be written here in full as name appears in the head of this voucher
The officer will also see that post-office address is correctly given and that the pension certificate must be carefully compared with the voucher by the officer who administers an oath and having a seal.
The officer will be held strictly responsible for the correctness of the information furnished by the pensioner and will also give his own post-office address as a check on the case of loss of the certificate.
Vouchers must be returned to the pension Department by February 1st, August 1st, or November 1st, for the payment of the pension in advance for each quarter.

Street and No. or R. F. D. route.....
Post-office.....
State.....

State of Kentucky, County of, ss.

Subscribed and sworn to before me this..... day of..... 1927, and I certify that the pensioner, above named, has this day exhibited to me his pension certificate, above described, and was fully identified as the pensioner named herein or her

(L. S.)
Magistrate's signature.....
Official character.....
Post-office address.....

(IF ANY ERASURES OR ALTERATIONS APPEAR ON THIS VOUCHER, THE MAGISTRATE MUST CERTIFY ABOVE HIS SIGNATURE TO THE JURAT THAT THEY WERE MADE BEFORE ITS EXECUTION.)

Name **Frances Price.**

November, 1927

VOUCHER

\$36.00

RETURN TO

J. T. GEORGE,

**COMMISSIONER OF CONFEDERATE PENSIONS
FRANKFORT, KY.**

INSTRUCTIONS TO OFFICER BEFORE WHOM THIS VOUCHER IS EXECUTED.

1. This voucher may be executed before any officer authorized to administer an oath and having a seal.
2. In every case the pension certificate must be carefully compared with the voucher by the officer who executes it.
3. The officer will also see that post-office addresses are correctly inserted in the proper spaces in the voucher, particularly the address to which the check is to be mailed. He will also give his own postoffice address after his official title on the face of voucher.
4. The officer will be held strictly responsible for the correctness of his certificate of identity in every particular.
5. Vouchers must be returned to the pension Department, by February 1st, May 1st, August 1st, or November 1st, following the execution of the vouchers in order that checks may be paid promptly each quarter.

Mrs Frances Price died

Sept 24th 1927.

*Please send check amount
due her to help pay
burial expenses.*

Respt

Mr + Mrs J. D. Campbell

P. 4

All acts involved in the execution or correction of vouchers must be performed in the presence of the officiating officer who must certify to the corrections over his own signature on the face of the voucher in the space indicated.

1. Signature by mark should appear thus
his
John X Doe
mark

2. Street and number, P. O. box number, R. F. D. route, or "General Delivery" must appear in P. O. Address in case of residence within carrier delivery. "General Delivery" addresses will be accepted in such case only if no other address as above is available.

3. Jurat must be dated.

M. B. HOLIFIELD

County Attorney of Graves County

OFFICE HOURS: 9 A. M. TO 4 P. M.

Mayfield, Kentucky December 30, 1912.

Hon. W. J. Stone,
Frankfort, Ky.,

Dear Sir:

Mrs. Francis Price, who is the widow of Gideon Price, has made application in due form for a pension under the Confederate pension Act. Her papers were forwarded some two or three months ago and have not been acted upon by the State Board. Please call the attention of the Board to this application at once. Mrs. Price though in poverty is a worthy applicant. She is suffering with cancer of the face and her left eye has been eaten out, and the disease has now attacked her arm and hand. All of her property together will not amount to \$300.00 and unless this aged lady receives this pension she will either have to depend upon the charity of friends or be sent to the county poor-house. I know that her husband was a soldier from conversations I have heard between him and my father when they were both living, but beyond this I can furnish you no information. I am,

Respectfully yours,

M. B. Holifield.

November 30, 1927.

Confederate Pension Department,

Frankfort,

Kentucky:-

Dear Sir:-

I mailed in to your office on November 27,
the certificate for a pension of Mrs. Frances Price, deceased.
I have today qualified as administrator for the above
mentioned Frances Price and if it is necessary for
me to have said certificate to fill out the voucher
that you will send me please return said certificate
with the voucher.

Thanking you, I am

Respectfully,

J D Campbell

State of Kentucky,

Graves County Court. Regular Term, Monday, August 19, 1912.

In the matter of application for pension of Mrs. Frances Price, whose post office address is Mayfield, Graves County, Kentucky, R. F. D. No. 12, the court makes the following report of findings, viz: That the applicant is and has been a resident of this State all her life; that she is the widow of Gideon Price; that she has no property or income and is in need of support; and that she does not now and has never received a pension from any State or Government.

Then came M. W. Rozzell whose address is Mayfield, Ky. and Ben Brown whose address is Mayfield, Kentucky, R. F. D. No. 12, witnesses herein, who after having been sworn testified as follows: That the applicant is the widow of Gideon Price, that she is a resident of this State; that she has no property or income and has no means of support.

Wherefore in view of the foregoing facts it is the judgment of the court that said applicant should be granted a pension and the court so recommends.

A copy

Attest: O. L. Mason, Clerk.

By *L. Mason*, D. C.

No. 323



COMMONWEALTH OF KENTUCKY

DEPARTMENT OF CONFEDERATE PENSIONS

It is hereby certified

That in conformity with the laws of the Commonwealth of Kentucky;

Francis Price (Widow of General Price)

who was a member of Company "B" Regiment Norfolk
Kentucky Cavalry

Confederate States Army, is entitled to a pension at the rate of Twelve
dollars per month, to commence on the First day of
August one thousand nine hundred and eighteen.

Given at the office of the Commissioner of Pensions

this First day of August
one thousand nine hundred and eighteen.

W. J. Stone

Commissioner.

SECTION 12 OF THE KENTUCKY PENSION LAW PROVIDES THAT

§ 12. No pension money granted under this act while due or to be become due to any pensioner, shall be liable to attachment or levy or seizure by or under any legal or equitable process whatever, whether the same remains with the State, or in the course of transmission to the pensioner entitled thereto.

No. 223

PENSION CERTIFICATE OF

Grace Price

Payable Quarterly

by the

Treasurer of Kentucky

at

Frankfort, Kentucky.

COMMONWEALTH OF KENTUCKY

STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

LOUISVILLE, KY.

No. **1992**

I, J. F. Blackerby, State Registrar of Vital Statistics, do hereby certify the following to be a true and correct copy of the CERTIFICATE OF DEATH of

PLACE OF DEATH Francis Price
County of Franklin on file in THE BUREAU OF VITAL STATISTICS of Kentucky.

Voting Precinct No. East Bryon Registration District No. 584 File No. 20279
Primary Registration District No. 5315 Registered No. 129

Incorporated Town _____ (No. _____ St., _____ Ward)
City _____ (If death occurred in a Hospital or Institution, give its NAME instead of street and number.)

(If death occurs away from USUAL RESIDENCE give facts called for under "Special Information.") Full Name Francis Price

PERSONAL AND STATISTICAL PARTICULARS

3 SEX Female 4 COLOR OR RACE White 5 Single Widow
Married Widowed or Divorced (Write the word)
6 DATE OF BIRTH Sept 19, 1835
(Month) (Day) (Year)
7 AGE 92 yrs. 5 mos. 5 ds.
IF LESS than 1 day or 1 hr. or 1 min?
8 OCCUPATION (a) Trade, profession or particular kind of work At Home
(b) General nature of industry business or establishment in which employed (or employer)
9 BIRTHPLACE (State or country) Kentucky
10 NAME OF FATHER C. Noel
11 BIRTHPLACE OF FATHER (State or country) Virginia
12 MAIDEN NAME OF MOTHER Don't know
13 BIRTHPLACE OF MOTHER (State or country) Don't know

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH Sept 24, 1927
(Month) (Day) (Year)
17 I HEREBY CERTIFY that I attended deceased from May 19, 1927 to Sept 24, 1927 that I last saw her alive on May 19, 1927 and that death occurred on the date stated above at 18
m. The CAUSE OF DEATH* was as follows:
Cancer of the face
(Duration) yrs. mos. ds.
Contributory Don't know
(Secondary)
(Duration) yrs. mos. ds.
(Signed) J. M. Shelton, M. D.
Sept 24, 1927 (Address) Mayfield 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 _____

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) J. D. Campbell
(Address) Mayfield R 4

Filed Sept 24 1927, Geo. Fuller Registrar.

19 PLACE OF BURIAL OR REMOVAL Price Graceryard DATE OF BURIAL Sept 25 1927

20 UNDERTAKER Carter Hdr. Co ADDRESS Mayfield Ky

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and caused the official seal to be affixed, at Louisville, Ky., this 3rd day of December in the year of our Lord one thousand nine hundred and

Francis Price
J. F. Blackerby
State Registrar.