

ORIGINAL

Questions for Applicant

STATE OF KENTUCKY,

Pulaski County. }

Mrs Sallie J May

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.) Sallie J May
State of Kentucky County of Pulaski, P O of Somerset
2. How long and since when have you been a resident of this State? 63 years, or since birth except 1 year
3. When and where were you born and what was your maiden name? Sallie Thurmond
Born 1850 in Lincoln Co Ky
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.) Jan 21 1835
Pulaski Co Ky. John J May. Danville Ky. Mr Bartholomew
5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States?
6. How long did your husband serve in said Company and Regiment?
7. When and where did your husband's Company and Regiment surrender?
8. Was your husband present at the time and place when his Company Regiment surrendered?
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? Somerset, Ky Aug 1 1914
11. At the time of your husband's death, were you living with him as his lawful wife? yes
12. Have you married since the death of your soldier husband? NO
13. What property, real or personal, or income do you have or possess, and its gross value?
About \$500⁰⁰ personal property no real estate or income
14. Have you a family? If so, who compose such family? yes one son and one daughter
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. J E Claunch, Somerset, Ky

Sworn to and subscribed before me, this, the

17th day of August 1914

George Orwin Notary Public
of Pulaski County.

Mrs Sallie J May

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

yes. yes

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

she says she has about \$500⁰⁰

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

she sold property to the amount of \$800⁰⁰ but necessary expenses has since reduced this amount to \$500⁰⁰

NOTE.—Let the witness who can answer the greatest number of 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.

I declare, from own personal knowledge that all the foregoing questions have been accurately answered

Sworn to and subscribed before me this 17th

day of August 1914

George Orwin
Notary Public

J. E. Claunch
Jos. M. Owens
Witnesses.

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

I, R. F. Jasper Judge of Pulaski County, Kentucky,

hereby certify that the property assessed on the tax books of this county to Mrs. Sallie T May the widow of John S May amounts to \$ 1500⁰⁰ real estate and

understand which has since been sold and I understand that she now has about \$500⁰⁰ personal. P. F. Jasper Judge. For Pulaski County, Ky.

Certificate of Clerk of Court or Notary Public

STATE OF KENTUCKY,

Pulaski County.

I, George Orwin Clerk or Notary Public, in and for said county, hereby

certify that the applicant, Mrs. Sallie T May resides in said county, and has been a bona fide resident of this State since the 20th day of October 1850 and that the witnesses, Mr. J. E. Claunch

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 herein 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 17th day of August, 1914

(SEAL) I hereby certify that I made the above erasure and changed the date 25th January 1888 to 20th October 1850 George Orwin, Notary Public Pulaski 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. *3086*

**Widow's
Indigent Pension**

Name *SALLIE T. MAY*

Filed *SEP 26 1914*

Widow of *JOHN S. MAY*

Allowed Oct 15th 1914
W. J. Stone
Commissioner
All blanks on this filing to be filled by the Pension Board
1914 Aug 17th Filed
att. Chas. Leiby down Ch.



ADJUTANT GENERAL'S OFFICE

AUG 1 1912
1940652

WAR DEPARTMENT

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

1940652

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE,

WASHINGTON, August 2, 1912.

Respectfully returned to the

Examiner,
Confederate Pension Department,
Frankfort, Kentucky.

The records show that John S. May served as lieutenant in Captain M. B. Perkin's Company, Grigsby's Regiment Kentucky Cavalry (latterly Company C, 6th Kentucky Cavalry), Confederate States Army, and that he enlisted September 12, 1862; that he was captured near Buffington Island, Ohio, July 19, 1863, and forwarded from Camp Morton, Indiana, to Camp Douglas, Illinois, and was paroled there and forwarded to Point Lookout, Maryland, for exchange February 20, 1865.

Henry P. McCall
Adjutant General.

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Indorsement.

PENSION EXAMINER'S OFFICE,

FRANKFORT, KY.

SALLIE T. MAY
WIDOW OF
JOHN S. MAY,

Enlisted Sept. 12, 1862, in Co. C, 6th Kentucky Cav. Captured July 19, 1863, in Ohio and exchanged Feb'y. 20, 1865. Proven by the records.

Property: \$500.00.

Approved:

W J Stone.

No. _____ S _____

HEADQUARTERS

Confederate Pension Department

W. J. STONE, EXAMINER

FRANKFORT, KY.

JUL 30 1912 191

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

Dear Sir:

John S. May

who is an applicant for Pension under the Kentucky Pension law, claims
to have been a member of Company *C. M. Perkins Co.*

Regiment _____ C. S. A., and to have been

Col. J. Warren Bigsby's Reg.

Gen. Abe Buford's Brigade

Please give me the record of this soldier.

Respectfully,

W. J. Stone

Examiner.

At A Regular Term of the Pulaski
County Court held in Somerset Ky
On Monday September the 14th 1914
Present and Presiding Hon R. F. Jasper Judge,
Bessie T. May.

On Application for Pension,

This day came Bessie T. May an applicant for
a pension under the laws of the state of Kentucky
granting pensions to confederate Soldiers of the war of
the Rebellion and to their widows and she introduced
in support of her application the following named
witnesses who bring duly sworn and orally exam-
ined in open court by G. W. Shadcan, county at-
torney state as follows; for E. Claunch, I am
well acquainted with Bessie T. May, she is not able to
earn a support by manual labor, nor by any knowledge
craft or profession or trade, she is a citizen of this
county and state, is not a pensioner, has no income,
has no property of the value of \$2500 her support is
not suitably provided for or secured by reason of
any contract or agreement for a valuable consideration
with any one nor has she any income or property or
combination of means that would produce an
income equal to \$300 per year, my address is
Somerset Ky. Also N. L. Barnett whose post office
is Somerset Ky and who bring duly sworn and orally
examined stated the same facts.

It is therefore the finding of this court that
the applicant Bessie T. May is a woman who

is incapable of earning her support by manual labor and who unquestionably is entitled to be placed upon the pension rolls as the widow of a Confederate Soldier and the Court so recommends.
All of which is Respectfully Submitted.

W. H. Hester Judge
Federal Court

This certifies that
John S. May and
Follie Thompson were by me
united in marriage, according to
the law of God and of the State
of Kentucky, at Danville, on the
twenty-fifth day of January
A. D. Eighteen hundred and eighty-eight.
O. A. Bartholmeaf Pastor,
Danville Christian Church.

A true copy.

MARGIN RESERVED FOR BLENDING

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.

Form V. S. 2-100m-8-23-26

COMMONWEALTH OF KENTUCKY
State Board of Health
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

County Barren File No. _____
 Registration District No. 403 Registered No. _____
 Inc. Town Cave City Ky Primary Registration District No. _____
 City _____ (No. _____ St., _____ Ward)
 (If death occurred in a hospital or institution, give its NAME instead of street and number)

2 FULL NAME Sallie Thurmond May
 (a) Residence. No. _____ St., _____ Ward _____
 (Usual place of abode) (If nonresident, give city or town and State)
 Length of residence in city or town where death occurred yrs. mos. ds. How long in U.S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS			MEDICAL CERTIFICATE OF DEATH		
3 SEX <u>Female</u>	4 COLOR OR RACE <u>White</u>	5 Single Married Widowed or Divorced (Write the word) <u>Widowed</u>	16 DATE OF DEATH <u>Jan 10</u> , 19 <u>29</u> (Month) (Day) (Year)	17 I HEREBY CERTIFY, That I attended deceased from <u>Dec 20</u> , 19 <u>28</u> , to <u>Jan 10</u> , 19 <u>29</u> , that I last saw her alive on <u>Jan 10</u> , 19 <u>29</u> , and that death occurred on the date stated above at _____ m. The CAUSE OF DEATH* was as follows: <u>Pharyngeal Tubercle</u>	
5a If married, widowed, or divorced HUSBAND of (or) WIFE of _____			(Duration) _____ yrs. _____ mos. _____ ds.		
6 DATE OF BIRTH <u>Oct 20</u> , 18 <u>49</u> (Month) (Day) (Year)	7 AGE <u>79</u> yrs. <u>2</u> mos. <u>24</u> ds.	IF LESS than 1 day _____ hrs. or _____ min?	Contributory (Secondary) <u>Influenza</u> (Duration) _____ yrs. _____ mos. _____ ds.		
8 OCCUPATION OF DECEASED (a) Trade, profession or particular kind of work <u>at Home</u> (b) General nature of industry, business or establishment in which employed (or employer) _____			18 WHERE WAS DISEASE CONTRACTED if not at place of death? _____ Did an operation precede death? _____ Date of _____ Was there an autopsy? _____ What test confirmed diagnosis? (Signed) <u>L. E. Coustat</u> , M. D. <u>1-10</u> , 19 <u>29</u> (Address) <u>Home Cave Ky</u>		
9 BIRTHPLACE (city or town) (State or country) <u>Ky</u>			*State the Disease Causing Death, or, in deaths from violent Causes, state (1) Means and nature of Injury; and (2) whether Accidental, Suicidal or Homicidal. (See reverse side for additional space.)		
PARENTS	10 NAME OF FATHER <u>Fielding Thurmond</u>	19 PLACE OF BURIAL OR REMOVAL <u>Home Cave Ky</u> DATE OF BURIAL <u>1-11</u> , 19 <u>29</u>			
	11 BIRTHPLACE OF FATHER (city or town) (State or country) <u>Ky</u>	20 UNDERTAKER <u>J. P. Gardner</u> ADDRESS <u>Cave City Ky</u>			
	12 MAIDEN NAME OF MOTHER <u>Sarah Meloy Baudry</u>				
13 BIRTHPLACE OF MOTHER (city or town) (State or country) <u>Ky</u>					
14 (Informant) <u>Mrs Geo Tucker</u> (Address) <u>Cave City Ky</u>					
15 Filed <u>1-14</u> , 19 <u>29</u> <u>J. W. Berry</u> Registrar					

Cave City Ky -
Jan 17-29.

B. F. Day -
Frankfort, Ky.

Dear Sir:

I write you to advise of the death of Mrs Sallie T. May on Jan 10. 1929. The enclosed voucher came yesterday - that shows Nov + Dec 1928

as due her. Please advise
us as this is needed
very much to pay on
her expenses of her illness
and burial.

Respt.

Mrs Geo T. Tucker

Box 256

Cove City

Ky.

STATE OF KENTUCKY
CONFEDERATE PENSION DEPARTMENT
FRANKFORT

B. F. Day

W. J. STONE, COMMISSIONER

Dear Sir:-

In order that the amount of pension due the pensioner on the day of death may be collected, it is necessary, under the law, that an administrator be appointed for the estate of the deceased and a copy of the Order of the Court making the appointment forwarded the Commissioner of Pensions, and also a copy of the Certificate of the Registrar giving the date of death of pensioner.

Then a voucher for the amount due will be mailed to the administrator, who shall fill out same, signing his name as administrator where it is indicated in the voucher for the pensioner to sign and return the voucher to this office.

There is no cost to the appointment of an administrator for the collection of pensions for the reason that the law provides that no official fee shall be charged by any officer of the State, or any county of the State-except Notaries Public-for services in connection with the prosecution or collection of pensions.

Yours truly,

B. F. Day -
W. J. STONE,

Commissioner.

Dear Sir :

Cove City Ky
1/28/24.

As per above instructions
as above I am enclosing
the appointment of an administrator
and copy of Certificate of Registrar
giving date of death. Thanking
you very much for attention you
give this.

Respt.,

Mrs Helen May Tucker.