DEOLIECTE	OD MANY YOUR	AL DEGG	2000	1. DATE		2. PULLTIME/STAFF INITIALS	
REQUEST F	ORDS	2/10	1/19	RW 9:30			
\times	4. RESEARCHER CARD NO.						
						11	
ITEM NOS. 2, 5, 6, 7, 8, AND 9 FOR STAFF USE ONLY	5. STACK AREA	6. ROW	7. COMPAI	RTMENT	8. SHELF	9. SEARCHER	
10. RECORD IDENTIFIC	ATON (Check one on	ly)	(If Mil	itary Service or	Bounty Land check	ced – complete items 11, 13, 14, and 15.	
If Pension is checked – complete items 11, 12, 13, 14, 15, and 16.)							
☐ MILITARY SERVICE	PENSION		BOUNTY LA	ND			
11. NAME OF SOLDIER			12. NAME	OF DEPENDE	ENT (if applicable)		
James K. Lane Ann				Ann B	Lane		
13. UNIT (CO, BN, or REGT.)			14. STATE SERVED FROM		OM	15. WAR, OR DATE OF SERVICE	
	16. PENSION FILE NUMBERS						
			APPLICA	TION		CERTIFICATE	
a. INVALID		8	3200		8	91599	
b. WIDOW		6	1846	5	5	32473	
c. MINOR							
d. MOTHER							
e. FATHER							
f. OTHER NUMBERS (C	, XC, BLWT, etc.)	XC	2.67	2.697	TO SERVICE		
17. RECEIVED	18. DATE			19. RETURNE	D	20. DATE	
NATIONAL ARCHIVES	AND PECOPDS ADM	AINISTD ATIO	INC	R. P. A. S. T. W. S. L.	and the second second second	NA EODM 14027 (10-12)	

DECLARATION FOR WIDOW'S PENSION

NOTICE.—This can be executed before a Notary Public, Justice of the Peace, or a Court of Record, or any officer duly qualified to administer oaths. If executed before any officer not having a seal, then a Clerk of a Court of Record, or a County or City Clerk, or Prothonotary, having a seal, shall certify to the signature of said officer.

	- Py		
ï	State of Louisian Country of 10.	eria	, 55;
ecor	On this 25th day of July A. D., one thou	usand eight hundred and nine	ty-five
f R	personally appeared before me, a Mutang public		1
rt o	within and for the County and State aforesaid, And Official title of Officer exceeding	this application.	Who
Con			, County &
8	aged years, a resident of the	VA	×
OF	of Wina, State of Za	who being duly sworn a	ecording cute
ace,	to law, declares that she is the widow of James R. Lane	, who enlisted u	inder the
Pe Pe	name of James R. James, at Jam of Soldier.	on the	etur
the		Reg't, egiment, if in military service, or vessel if in	Vols.
of of	and served at least ninety days in the late War of the Rebellion, who was Ho		de B
stice	day of Och 186 5, and died a home day him factor	in the State of	, va
Jus		894. That she was marri	ed under
lic.	Bastt to soid fames	R. Lane	P H
Pub	on the 2) day of Name before marriage.	ame of soldier or sailor.	F
rv			ACI
Tota	at hus Theria Za , there being no legal barrier to sa	aid marriage	, Y
2.	If there was a former marriage of claimant or her husband	state of here.	Att
ore	That she has not remarried since the death of the said	Name of Soldier.	of all the
hef	That she is without other means of support than her daily labor; the children now living under sixteen years of age of the soldier are as follows:	iat halics and dates of services	ys,
ted	James R. born ang 20 , 18 9 3	, born	, 18
FOR	Mr. C., born ang 20, 18.94	, born	, 18
0	, 0011	, born	, 18 ngt
4	, born , 10 .		on,
00	That she has heretofore applied for pension If you have ever before applied for pension	ore applied for pension state number of app	tes, under
Phie	That she makes this declaration for the purpose of being placed on the purpose of the provisions of the act June 27, 1890. That she hereby agrees to allow	w her attorney a fee of \$10	when the
Milwas	claim is allowed. She hereby appoints		
TAL	R. S. & A. P. LACEY, OF WASHIN her true and lawful attorney to prosecute her claim; that her post-office address	GTON, D. C.	
TOT	her true and lawful attorney to prosecute her claim; that her post-office address	ess is Jen vona	
- Constitution of the last of	county of Hina, State of Louis	siana.	
alc.	ATTEST:	Mrs down B.	Lane
		Claimant's Signature.	9

1, 1,	1-10
	, residing at Men Using
County of Deria, State of Mills	our and Harding Thomas
	Name of second witness
residing at Men Meria, County of Thenia	
persons whom I certify to be respectable and entitled to credit, and w	
present and saw Ann Po. Zana	, the claimant, sign her name (make
her mark) to the foregoing declaration; that they have every reason to be	elieve from the appearance of said claimant and
their acquaintance with her that she is the identical person she repres	sents herself to be, and know that said deceased
recognized said applicant as his lawful wife, and that she was so recog	mized by the community in which they resided,
and that they have no interest in the prosecution of this claim.	(8. 2)
1	1 2 ///
2	2. # # 10
[If either witness signs by mark, two persons who can write, must sign here.]	[Signatures of witnesses.]
	•
o mile	? /
Sworn to and subscribed before me this day of	
and I hereby certify that the contents of the above declarati	on, &c., were fully made known and explained
to the applicant and witnesses before swearing, including the v	vords
, erased, and the w	rords
, added; and tha	t I have no interest, direct or indirect, in the
prosecution of this claim.	
procedured of this citation.	MAD 1
NE ALIAN	Molahon baye
[L. s.]	Motorn Oublie
NE ALIAN	[Signature.] Listany Sablic [Official Character.]
NE ALIAN	Melalina Baya [Signature.] Motory Melica [Official Character.]
NE ALIAN	Molahan Baya [Signature.] Molie [Official Character.]
NE ALIAN	

CLAIM FOR PENSION.

Craimant Arm FOR PENSION.

Craimant Arm B. Arm.

Service, Co. 7

Service,

(3-060.)

4	(0-000)
Easter Div.	
7. L. C. Ex'r.	Department of the Interior,
Weid Cl. 618465	Separament of the Suitetion,
ann B Larve	BUREAU OF PENSIONS,
James P. Jame	1 1
Jumes / Jame	Washington, D. C., September 6, 1895
SER:	\rightarrow \cap
it is alloged that fanue	2 R. Laure enlisted Left, 22, ,1862 in Co. 74, 156 Reg't Wy Suf. in Co. , Reg't
and served as a	in Co. 7, 156 Reg't Wy Suf.
al as a	in Co. Reo't
301	
132	
and was discharged at	, October 23 , 1865
It is also alleged that while on d	luty at
on or about	, 18, he was disabled by
	9, 9, -
	Un dalu-
and was treated in hospitals of which	h the names, locations, and dates of treatment are as follows:
	No date
	No dola
In easy of the above named and	ion the Wan Department is a set of the set o
	ier the War Department is requested to furnish an official statement showing Please give the rank he held at the time he is claimed to have incurred the
	w that he was not in line of duty during that period, let the fact be stated.
	data period, let the fact be stated.

Very respectfully,

The Chief of the Record and Pension Office, War Department.

Commissioner.

No. 618460

WAR DEPARTMENT, RECORD AND PENSION DIVISION.

Respectfully returned to the Commissioner of Pensions.

was enrolled The see 1862 and M Out of Oct 28, 1862

From Grace Care 186 to M. J. 186.

The held the rank of Private rank of Private rank

and during that period the rolls show him present except as follows: Apr 30/63 absent side in Franklin Oct 31, 64. absent wanded all therebester but Hoseph June 30/65 attented as a following and the states are and a following and the states are a followed as a following and the states are a followed as a following and the states are a followed as a following and the states are a followed as a following and the states are a followed as a following and the states are a followed as a following a following and the states are a followed as a follo

The medical records show him treated as ollows; as fame of the first and as a fame of the fame of the

Othing additional faces



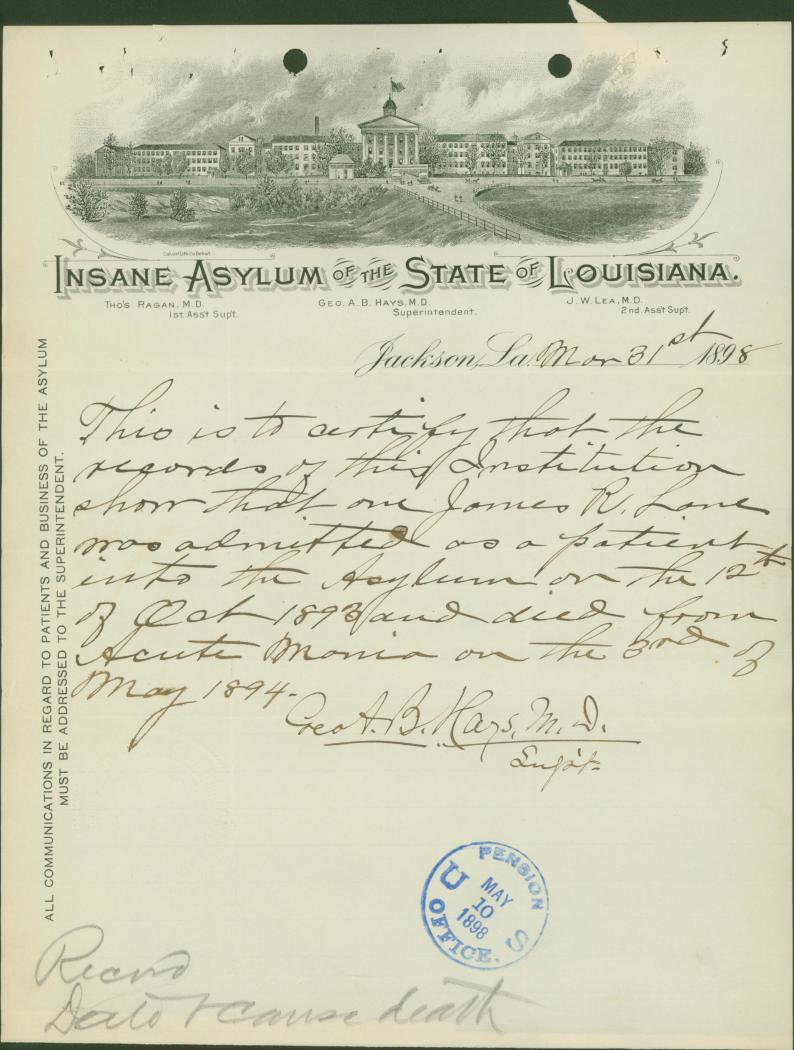
By authority of the Secretary of War

Major and Surgeon, U.S.
SEP 7 1895

(COMMISSIONER OF PENSIONS.)

POWER OF ATTORNEY!

	Know all Men by these Presents, That I, Annie have have midow of
	V9 ames A. L'ane of New Heria, L'onisiana
	James A. Lane of New Heria, Lausiana 1) late Co. H. 156 Reg't ON. 9. Inf Vol., do hereby constitute and appoint A. W.
	McCORMICK & SONS, of Washington, D. C., my true and lawful Attorneys, irrevocable, with Power of sub-
	stitution, for me and in my name, to prosecute my claim against the United States for pension No. 618465,
	monister act of June 27th, 1890
	And I do hereby authorize and empower my said Attorneys to prosecute said claim to final issue, and to do
	all other acts necessary in the premises, hereby revoking all Powers of Attorney heretofore given for like
4	purposes.
No.	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 24 day of Nov 1897.
A	In the presence of two witnesses who can write.
	27 Dulary Somie & Jane Claimant's Signature.
	T. V. Melshin D. L.) Claimant's Signature.
	State of Louisiana, Heria County, 88:
	BE IT KNOWN, that on this desand day of November 1897, personally appeared
	before the undersigned authority in and for said County and State, the above-named has Annue
	who acknowledges the signing and sealing of the foregoing Power of
	Attorney to be his of voluntary act and deed for purpose therein stated.
	Execute before Clerk of Court, Notary or Justice. DEC 11
	Execute before very of Court, Notary or Justice.



mo 618, 465 Anna L widow of Lunus R Lane 71 - 156 - 184

