

Commonwealth of Massachusetts.

No. _____

RETURN OF A DEATH.

To the Clerk of the City or Town in which the death occurred.

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Name, Charles Walcott Sex, Male Color, _____

Date of Death, March 19th 1901 189 ; Age, 80 Years, 2 Months, 1 Days.

Maiden Name, { If married, widowed or divorced. } _____

Husband's Name, _____

Single, Married, Widowed or Divorced, Married Occupation, Retired

*Residence, { If out of town, also state fully. } Stow

Place of Birth, Baltimore Md

*Place of Death, Stow

Name of Father, Robert Walcott

Birthplace of Father, Stow

Maiden name of Mother, Hannah Hapgood

Birthplace of Mother, Unknown

Place of Interment, (Give name of Cemetery), _____

Dated at Stow on November 29, 1901 189 Signature and place of business of Undertaker. { _____

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased, † _____ Age, Y. M. D.

Place and Date of Death, ‡ died at _____ 189

Disease or Cause of Death, § Age & Paralysis

Duration of sickness, _____

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. { _____ M. D.

Date of Certificate, _____ 189 .

Give also street and number, if any. † Or sex of infant not named. If still-born, so state. ‡ If child died immediately after birth, so state. § If a Soldier or Sailor in the War of the Rebellion, give both Primary and Secondary Cause.



Death of Soldier OR

I Henry Gates Town Clerk of Stow do hereby certify that the above is a true copy from the town records of Stow Mass

Henry Gates, Town Clerk

Middlesex SS November 30 1901

The deceased above named

[Act of June 27, 1890.]



Commonwealth of Massachusetts.

PENSION DEPARTMENT.

STATE HOUSE, BOSTON.

DECLARATION FOR WIDOW'S PENSION.

To be executed before a Court of Record or some officer thereof having custody of its seal, a Notary Public or Justice of the Peace, whose official signature shall be certified by a Clerk of a Court of Record, or a City or County Clerk, provided said Certificate is not already on file in the Pension Office at Washington.

State of Massachusetts,

County of Suffolk } ss.

On this 14 day of Nov, A.D. one thousand nine hundred and one

personally appeared before me, a Notary Public

within and for the county and State aforesaid, Sophronia Walcott

aged 76 years, a resident of the City of Boston, county

of Suffolk, State of Mass, who, being duly sworn according

to law, declares that she is the widow of Charles Walcott, who enlisted under the name

of Charles Walcott, at on the 5 day of January,

A.D. 1864, in 15th Battery Mass L. Art. [Here state rank, company and regiment, if in military service, or vessel, if in navy.]

and served at least ninety days in the late war of the rebellion, who was honorably discharged Aug 4 1865. and died March 1901. [The cause of death need not be stated.]

That the soldier had not been employed in the military or naval service otherwise than as stated above.

That she was married under the name of Sophronia Priest to said

Charles Walcott on the 13 day of Sept A.D. 1883

by Rev. E. A. Smith, at Lowell Mass

there being no legal barrier to said marriage; that neither she nor her husband had been previously married.

That she has not remarried since the death of the said

George W. Priest died Feb 28 1870. First wife Eliza Walcott died March 9 1881. [Name of soldier or sailor.]

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

born 18, born 18, born 18, born 18

That she has not heretofore applied for pension and the number of her application is [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.

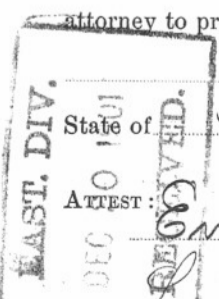
She hereby appoints J. B. PARSONS, State Pension Agent of Massachusetts, Boston, her true and lawful attorney to prosecute her claim (without fee); that her post-office address is 98 Dartmouth St. Boston, county of Suffolk, Mass

State of Mass

ATTEST: Eva B. Holbrook her mark

Louisa C. Evans

[Certification marriage, death, death 1st husband & death 1st wife filed with claim for accrued pens]



3-361.
(Old No. 3-128 a.)

No. 753414.

ACT OF JUNE 27, 1890, AS AMENDED BY ACT OF MAY 9, 1900.

WIDOW'S PENSION.

car
543478
Boston

Claimant Sophronia Walcott Soldier Charles Walcott
P. O. 98 Dartmouth Street, Rank Private
County Suffolk, State Massachusetts Regiment 15th Batty, Mass. Vol. G. A.

Rate, \$8 per month, commencing December 13 1901 and \$2 additional for each child, as follows:

HS

none

Born,	Commencing
Sixteen,	Commencing
Born,	Commencing
Sixteen,	Commencing
Born,	Commencing
Sixteen,	Commencing
Born,	Commencing
Sixteen,	Commencing
Born,	Commencing
Sixteen,	Commencing
Born,	Commencing
Sixteen,	Commencing

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

All pension to terminate, 190..., date of

RECOGNIZED ATTORNEY.

J. B. Parsons

Name J. B. Parsons Fee, \$ none Agent to pay.
P. O. Boston, Mass. Articles filed, 189...

APPROVALS.

EASTERN

Submitted for adm Nov. 17, 1902 V. M. Tucker, Excise Det.

Approved for admission under the act of June 27, 1890, as amended
by the act of May 9, 1900.

November 19, 1902 M. P. Mattenell, Rev. Registrar

The soldier was pensioned at \$ 12 per month for arthritis, paralysis, and general debility

Enlisted January 5, 1864 Soldier's app'n filed August 29, 1889

honorably disch'd August 4, 1865 " " " U.S. July 22, 1890

Reenlisted, No other service, 18... Former marriage of both, 18...

honorably disch'd, 18... Death of former husband Feb 28, 1870

Died March 19, 1891 " " " wife March 9, 1881

Declaration filed December 13, 1901 Clt's marriage to soldier September 13, 1883

Claimant does not write. Clt. not remarried, No divorce, 18... No, M. C.



Commonwealth of Massachusetts.

PENSION DEPARTMENT, STATE HOUSE, BOSTON.

AFFIDAVIT.

State of Massachusetts,

County of Suffolk } ss.

Act of June 27th 1890.

In the matter of the claim for Widow's Pension 753414 of Sophronia Walcott widow of

Charles Walcott of Company 15 Battery Regiment Mass L. A. Vols.:

Personally came before me, a Notary Public in and for aforesaid County and State, Sophronia Walcott and

resident of Boston in the County of Suffolk, State of Mass, who being

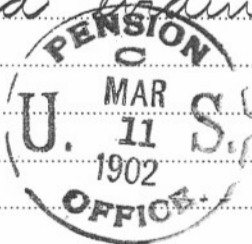
duly sworn, declare in relation to aforesaid claim, as follows: -

That she is the claimant above named and that she was never married except to George H. Priest and to Charles Walcott. That her husband, ^{the soldier} was never married except to his former wife Eliza and to herself.

That she owns no property of any kind whatever, she has no income from any source, no one living is legally bound for her support and she is dependent upon those not legally bound to support her. Her husband's life was not insured.

That she has never made a prior claim for pension.

That she is unable to furnish the evidence of another person to corroborate the affidavit of Cornelia O. Hildreth as she knows of no one who can give the desired evidence.



further declare that no interest in said claim, and not concerned in its prosecution.

Signatures of witnesses: Eva B. Holbrook, Benjamin A. Sawyer

Attest when any affiant signs BY MARK two persons sign here.

Affiant's Signature, Sophronia Walcott; P. O. Address, 98 Dartmouth St Boston

Affiant's Signature, P. O. Address,

claimant.

VOL. 344
 PAGE 148
 No. 491

Commonwealth of Massachusetts.

Office of the Secretary.

Boston, November 14, 1901.

I hereby certify That the **MARRIAGE** of Charles Walcott
 of Stowe, aged 62 years, (2d mar.), and Sophronia
 Priest, of Lowell, aged 44 years, (2d
 mar.), solemnized at Lowell, on the 13th day of Sept in the
 year 1883, by Rev. E. A. Smith, appears of
 record in this Department by duly attested Return of the clerk
 of the city of Lowell for that year.

WITNESS THE SEAL OF THE COMMONWEALTH hereunto affixed
 at the date first above written.

Wm M. Olin

SECRETARY OF THE COMMONWEALTH.



msc ok

Commonwealth of Massachusetts.

No.

RETURN OF A DEATH.

To the Clerk of the City or Town in which the death occurred.

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

Name, Ediza Walcott Sex, Female Color,

Date of Death, March 9 1881 189 ; Age, 58 Years, 5 Months, 15 Days.

Maiden Name, { If married, widowed or divorced. } Ediza Gates

Husband's Name, Charles Walcott

Single, Married, Widowed or Divorced, Married Occupation,

*Residence, { If out of town, also state fully. } Stow

Place of Birth, Stow

*Place of Death, Stow

Name of Father, Joel Gates

Birthplace of Father, Unknown

Maiden name of Mother, Eunice Piper

Birthplace of Mother, Unknown

Place of Interment, (Give name of Cemetery), Brookside Cemetery Stow

Dated at Stow Signature and place of business of Undertaker. {

on November 29th 1901 189

PHYSICIAN'S CERTIFICATE.

Name and Age of Deceased, † Age, Y. M. D.

Place and Date of Death, ‡ died at 189.

Disease or Cause of Death, § Paralysis

Duration of sickness,

I certify that the above is true to the best of my knowledge and belief.

Signature and Residence of Certifying Physician. { M. D.

Date of Certificate, 189 .

Give also street and number, if any. † Or sex of infant not named. If still-born, so state. ‡ If child died immediately after birth, so state. § If a Soldier or Sailor in the War of the Rebellion, give both Primary and Secondary Cause.



Death of former wife

I Henry Gates Town Clerk of Stow do hereby certify that the above is a true copy from the town records of Stow Mass

Henry Gates. Town Clerk,

Widell Street ss. November 30th 1901

Then personally appeared the above named

ACT OF JUNE 27, 1890.

3-402.

BOSTON,

Certificate No. 543511 Department of the Interior,
 Name, Charles Walcott 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,

W. C. Bryant
 Commissioner of Pensions.

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

Answer. Yes

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

Answer. _____

Third. What record of marriage exists?

Answer. _____

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. Yes. Eliza Gates died March 9th 1881 Ston Mass

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

Answer. 2 Willard Walcott born April 25th 1844
Ernie (Walcott) Marshall born August 8th 1850

Date of reply, June 9th, 1898

Ernie Marshall
 (Signature.)

ACT OF JUNE 27, 1890.

DECLARATION FOR INVALID PENSION.

To be Executed before a Court of Record or Some Officer thereof having Custody of its Seal.

State of Massachusetts County of Middlesex, ss:

On this 16th day of July A. D. one thousand eight hundred and ninety

personally appeared before me Justice of the Peace

of the Court, a court of record within and for the county and State afore-

said Charles Walcott aged 70 years, a resident

of the Town of Abbeville county of Middlesex

State of Mass, who, being duly sworn according to law, declares that he is the

identical Charles Walcott, who was ENROLLED on the 5th

day of January, 1864, in 15th Battery Mass. Lt. Art'y (Here state rank, company and Regiment in Military service, or vessel, if in the Navy.)

in the war of the rebellion, and served at least ninety days, and was HONORABLY DISCHARGED at, on the 4th

day of August, 1865. That he is wholly unable to earn a support by

reason of Rheumatism and paralysis of the limbs in bed-fast. Am unable to leave his room since he was paralyzed. (Here name the disease or injuries from which disabled)

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. 725936

That he is a pensioner under Certificate No. (If a pensioner, the Certificate number only need be given. If not, give the number

of the former application if one was made.)

That he 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.

He hereby appoints J. S. PATTERSON.

of BOSTON, MASS., State of, his true and lawful attorney

to prosecute his claim. That his POST-OFFICE ADDRESS is Abbeville

county of Middlesex, State of Mass.

Attest: Grace M. Fletcher. (Claimant's Signature.)

Charles E. W. Boy

Charles Walcott

2

(3-060.)

Cash

Div.

J. D. H.

Ex'r.

Department of the Interior,

No. 725,938

BUREAU OF PENSIONS,

Charles Walcott
Pot. 15th Batty. Mass L.A.

June 13th, 1889.

SIR:

I have the honor to request that you will furnish from the records of the War Department a full Report as to the service, disability, and hospital treatment of

Charles Walcott, who, it is claimed, enlisted
January 5th, 1864, and served as a private
in Co. _____ Reg't _____; also in Co. _____
in 15 Batty, Mass, L.A.

and was discharged at Redville, Mass, Aug 4, 1865
said organization

While serving in Co. _____ Reg't _____ he was disabled by
rheumatism, contracted at New Orleans
La, about March 1864,

also

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

In Overton Hospital at Memphis
Tenn,
date of treatment not stated.

Very respectfully,

J. S. Baum
John Black
Commissioner

The Adjutant General, U. S. Army.