

**SOLDIER:**

**JEFFERSON ELY**

**ORDER FOR COPIES OF VETERANS RECORDS**

DATE RECEIVED IN NNRG

INDICATE BELOW THE TYPE OF FILE DESIRED AND THE METHOD OF PAYMENT PREFERRED.

<b>1. FILE TO BE SEARCHED</b> (Check one box only) <input checked="" type="checkbox"/> PENSION <input type="checkbox"/> BOUNTY-LAND WARRANT APPLICATION (Service before 1856 only) <input type="checkbox"/> MILITARY	<b>2. PAYMENT METHOD</b> (Check one box only)		<input checked="" type="checkbox"/> PAYMENT RECEIVED THANK YOU.
	<input type="checkbox"/> CREDIT CARD (Visa or Mastercard) for immediate shipment of copies Account Number: _____ Exp. Date: _____ Signature: _____ Daytime Phone: _____		

**REQUIRED MINIMUM IDENTIFICATION OF VETERAN - MUST BE COMPLETED OR YOUR ORDER CANNOT BE SERVICED**

<b>3. VETERAN</b> (Give last, first, and middle names) E. J. Jefferson		<b>4. BRANCH OF SERVICE IN WHICH HE SERVED</b> <input checked="" type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> MARINE CORPS	
<b>5. STATE FROM WHICH HE SERVED</b> New Jersey	<b>6. WAR IN WHICH, OR DATES BETWEEN WHICH, HE SERVED</b> CIVIL WAR	<b>7. IF SERVICE WAS CIVIL WAR,</b> <input checked="" type="checkbox"/> UNION <input type="checkbox"/> CONFEDERATE	

**PLEASE PROVIDE THE FOLLOWING ADDITIONAL INFORMATION, IF KNOWN**

<b>8. UNIT IN WHICH HE SERVED</b> (Name of regiment or number, company, etc., name of ship) Co. E. 2nd Reg.		<b>9. IF SERVICE WAS ARMY, ARM IN WHICH HE SERVED</b> <input type="checkbox"/> INFANTRY <input checked="" type="checkbox"/> CAVALRY <input type="checkbox"/> ARTILLERY Rank: <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> ENLISTED		If other, specify:
<b>11. PENSION/BOUNTY-LAND FILE NO.</b>	<b>12. IF VETERAN LIVED IN A HOME FOR SOLDIERS, GIVE LOCATION</b> (City and State)		<b>13. PLACE(S) VETERAN LIVED AFTER SERVICE</b> Yardleyville, Pa.	
<b>14. DATE OF BIRTH</b>	<b>15. PLACE OF BIRTH</b> (City, County, State, etc.)	<b>18. NAME OF WIDOW OR OTHER CLAIMANT</b>		
<b>16. DATE OF DEATH</b> 18 MAR. 1896	<b>17. PLACE OF DEATH</b> (City, County, State, etc.) Yardleyville, Bucks Cty., Pa.			

NATIONAL ARCHIVES TRUST FUND BOARD NATF Form 80 (rev. 1-61)

DATE SEARCHED: 5-21-91	SEARCHER: [Signature]	FILE DESIGNATION: E. J. Jefferson 311-426-869
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**THESE ARE THE COPIES YOU ORDERED FROM THE FILE IDENTIFIED ABOVE. DO NOT SEND ADDITIONAL PAYMENT.**

SEND TO:

NAME (Last, First, MI) Heinz, Helen A.	A130508
STREET 1355 Edgewood Rd.	06 28 91
CITY, STATE Yardley, Pa.	ZIP CODE 19067

MAILROOM COPY - DO NOT DETACH

91 MAY 16 11 3:41

State of Pennsylvania,  
County of Bucks,

ss.

J. D. Sidney, Notary Public, do hereby certify

that the following is an exact and true copy of the marriage certificate of Jefferson K. Ely and Sarah J. Riley:

"This is to certify, that on the eighth day of September in the year of our Lord one thousand eight hundred and fifty-three, before me, J. D. Schofield, Esquire, one of the Justices of the Peace, in and for the County of Bucks,

Jefferson K. Ely of Lower Merion, Bucks County, Penna., and Sarah J. Riley, of same place, were legally joined in marriage, each of them being of full age, and desiring themselves free, respectively, from prior engagements, or other lawful impediments.

"In witness whereof, as well they, the said Jefferson K. Ely and Sarah J. Riley (she assuming the name of her said husband.)

as of the said guests, and other the witnesses  
present, have hereunto subscribed our names,

the day and year aforesaid.

[Signed]

Witness:  
Attie Achefeld.  
Wm. Achefeld.  
Jefferson K Ely.  
Sarah J. Ely  
G. J. Achefeld

Guests:  
"

Learned attor: Done this 23<sup>rd</sup> day of May, 1896.

Wm. H. Kautzsch

Notary Public:

# APPLICATION FOR ACCRUED PENSION.

(WIDOWS.)

State of Pennsylvania County of Bucks ss:

On this 26<sup>th</sup> day of March 1896, personally appeared Sarah J. Ely, who, being duly sworn, declares that she is the lawful widow of Jefferson Ely, deceased; that he died on the 18<sup>th</sup> day of March 1896; that he had been granted a pension by Certificate No. 619,809, which is herewith returned (or is attached to this application);

that he had been paid the pension by the Pension Agent at Philadelphia up to the 4<sup>th</sup> day of February 1896; after which date he had not been employed or paid in the Army, Navy, or Marine service of the United States, except \_\_\_\_\_; that

she was married to the said Jefferson Ely on the 8<sup>th</sup> day of September, 1863, at Yardleyville, in the State of Pennsylvania; that her name before said marriage was Sarah J. Riley; that she ~~had~~ (or had not) been previously married; that her husband ~~had~~ (or had not) been previously married; that she hereby makes application for the pension which had accrued on aforesaid certificate to the date of death; and that her residence is No. Yardley, Street, City of \_\_\_\_\_, County of Bucks, State of Penna, and her post-office address is Yardley, Bucks Co, Penna.

(Widow's signature.)

Sarah J. Ely X

Also personally appeared Joseph W. Riley, residing at Yardley, Pa, and James S. Mudd, residing at Yardley, Pa, who, being duly sworn, say they were present and saw Sarah J. Ely sign her name (make her mark) to the foregoing declaration; that they know her to be the lawful widow of Jefferson Ely, who died on the 18<sup>th</sup> day of March, 1896; and that their means of knowledge that said parties were husband and wife, and that the husband died on said date, are as follows:

personal acquaintance with the parties for 30 years, and attendance at the funeral of deceased.

(Signature of witnesses.)

Joseph T. Riley ✓  
James S. Mudd ✓

Sworn to and subscribed before me on this 26<sup>th</sup> day of March, 1896, and I certify that the affiants are reputable persons; that they know the contents of their depositions, and that their statements are entitled to full faith and credit. I further certify that I have no interest, direct or indirect, in the above claim:

(Signature.)

William L. ...  
Notary Public

Also personally appeared

*Joseph T. Riley*, residing at *Yardley*, and *James G. Neeld*, residing at *Yardley*, persons whom I certify to be respectable and entitled to credit and who, being by me duly sworn, say they were present and saw *Sarah J. Ely* claimant, sign her name (or make her mark) to the foregoing declaration; that they have every reason to believe from the appearance of said claimant and an acquaintance with her of *30* years and *30* years, respectively, that she is the identical person she represents herself to be; and that they have no interest in the prosecution of this claim, ~~and~~

(1) *Joseph T. Riley*  
(2) *James G. Neeld*  
(Signatures of witnesses.)

Sworn to and subscribed before me this *twentieth* day of *March*

A. D. 18*96*, and I hereby certify that the contents of the above declaration, etc., were fully made known and explained to the applicant and witnesses before swearing, including the words "and" erased; and the words \_\_\_\_\_ added; and that I have no interest, direct or indirect, in the prosecution of this claim.

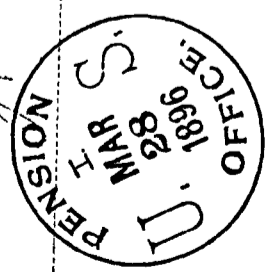
*Sidney Caldwell*  
(Signature.)  
*Notary Public*  
(Official character.)

The Act of June 27, 1890, requires, in widow's case:

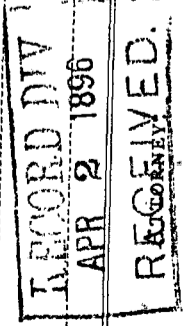
1. That the soldier served at least NINETY DAYS in the War of the Rebellion and was HONORABLY DISCHARGED.
2. Proof of soldier's death (death cause need not have been due to Army service).
3. That widow is "without other means of support than her daily labor!"
4. That widow was married to soldier prior to June 27, 1890, date of the Act.
5. That all pensions under this act commence from date of receipt of application in Pension Bureau.

*no. 019,809.*  
*cc Application for widow*  
WIDOW'S APPLICATION.

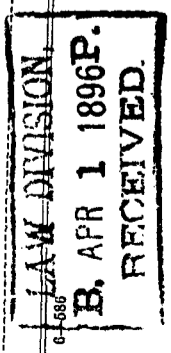
Claimant, *Sarah J. Ely*  
Soldier, *Pederson Ely*  
Service, *Ph. C. 2 N.Y. Regt*



ADDRESS:



Address,



Act of June 27, 1890.

CC

DECLARATION FOR WIDOW'S PENSION.

CC

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 verified by his official seal, and in case he has none, his signature and official character shall be certified by a Clerk of a Court of Record, or a City or County Clerk.

STATE OF Pennsylvania, }
COUNTY OF Bucks } ss:

On this 26th day of March, A. D. one thousand eight hundred and fifty-six, personally appeared before me, a Notary Public

within and for the county and State

aforsaid Sarah J. Ely, aged 56 years, a resident of

the Borough of Yardley, county of Bucks, State of

Pennsylvania, who, being duly sworn according to law, declares that she is the widow

of Jefferson Ely, who enlisted under the name of Jefferson Ely

at Trenton, N. J., on the 23rd day of August,

A. D. 1864, in Co. E. 2nd N. J. Cavalry

(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, in the service of the United States; who was HONORABLY DISCHARGED

June 29, 1865, and died March 18, 1896;

(The cause of death need not be stated.)

That the soldier was not in the Military or Naval service of the United States except as above stated.

(If any other service it should be stated in full.)

That she was married under the name of Sarah J. Riley, to said

Jefferson Ely, on the 8th day of September,

1863, by J. J. Schofield, Esq., at Yardleyville (Lower Makefield township) Pa.

there being no legal barrier to said marriage.

(If there was a former marriage of claimant or her husband, state it here and how dissolved.)

That she has not remarried since the death of the said Jefferson Ely

(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, born, born, born

born, born, born, born

born, born, born, born

That she has heretofore applied for pension and the number of her former 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, of

State of, her true and lawful attorney to prosecute her claim and receive a fee of \$

That her post-office address is Yardley,

county of Bucks, State of Penna.

Sarah J. Ely

(Claimant's signature.)

Attest: (1) Joseph T. Riley

(2) James E. Mead

Also personally appeared James D. Brown residing at General  
(Name of first witness.)

and Joseph G. Wiley residing at Montgomery  
(Name of second witness.) Co Pine

persons whom I certify to be respectable and entitled to credit and who, being by me duly sworn, say they were present and saw James D. Brown the claimant, sign his name (or make his mark) to the foregoing declaration, that they have every reason to believe from the appearance of said claimant and their acquaintance with him for 20 years and 15 years respectively, that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

James D. Brown  
Joseph G. Wiley  
(Signatures of witnesses.)

to and subscribed before me this 14th day of August A. D. 1890 and I hereby certify that the contents of the above declaration, &c., were fully made known and explained to the applicant and witnesses before swearing, including the words erased, and the words added; and that I have no interest, direct or indirect, in the prosecution of this claim.

Robert Estlin  
(Signature.)  
Robert Estlin  
(Official Character.)

**Declaration for Invalid Pension.**

Act of JUNE 27, 1890.

Name James D. Brown  
Rank 2nd Lt. Col. 2nd Regt  
Ed. J. Carr Vol's

This disease and this application to some friend who is entitled to a law.



FILED BY  
**J. B. CRALLE & CO.**  
U. S. PENSION ATTORNEYS,  
Cralle Building, 108 C Street, N. W.  
WASHINGTON, D. C.

**READ THESE NOTES CAREFULLY BEFORE FILLING UP THE APPLICATION.**

- The act of JUNE, 1890, REQUIRES: An honorable discharge (but the certificate need not be filed unless called for.)
- A service of not less than ninety days.
- A permanent physical or mental disability not due to vicious habits. (It need not have originated in the service.)
- The rates under the act are graded from \$6 to \$12 proportioned to the degree of inability to earn a support and are not affected by the rank held.
- A pensioner under existing laws may apply under this one, or a pensioner under this one may apply under other laws, but he cannot draw more than ONE pension for the same period.
- Fill up the blank carefully, and be particular to give the certificate number if you are a pensioner, and if not, the number of your application if you have made application.
- Under act of July 1, 1890, all applications for pensions may be executed before a Clerk of Court, Notary Public, or any officer authorized to administer oaths who uses a seal, or who will have the certificate of a Clerk of Court attached to the application, showing his official character,

Orig 626 532  
626 532 385

Prof. 12-4-90  
MLB

4/52  
J

Also personally appeared James D. Brown residing at York  
(Name of first witness.)

and Joseph H. Bailey residing at Adelphi  
(Name of second witness.)

persons whom I certify to be respectable and entitled to credit and who, being by me duly sworn, say they were present and saw Jefferson E. Day the claimant, sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe from the appearance of said claimant and their acquaintance with him for 20 years and 15 years respectively, that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

James D. Brown  
Joseph H. Bailey

State of Pennsylvania, County of Bucks, ss.

(Official signature.)

I, Oswin C. Keiper Prothonotary of the Court of Common Pleas of the County and State aforesaid, do **Hereby Certify** that Robert Eastburn Esq is a Justice of the Peace in and for said County, and duly qualified to act as such; that his term of office commenced on the first Monday of May in the year 1892 and will expire on the first Monday of May in the year 1895; and that his signature above written is genuine.

**Given** under my hand and seal of the said Court, at Doylestown, this 13<sup>th</sup> day of August in the year of our Lord one thousand eight hundred and ninety.

Oswin C. Keiper Prothonotary.

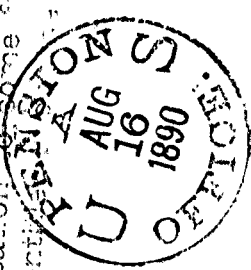
Declaration for Invalid Pension.

Act of JUNE 27, 1890.

Name Jefferson E. Day  
Rank Co. C Reg't

Ed. J. Carr Vol's

Please send this application to some friend who is entitled to receive it at NEW-YORK.



FILED BY  
**J. B. CRALLE & CO.**  
U. S. PENSION ATTORNEYS,  
Cralle Building, 108 C Street, N. W.,  
WASHINGTON, D. C.

4/54

READ THESE NOTES CAREFULLY BEFORE FILLING UP THE APPLICATION.

The act of JUNE, 1890, REQUIRES: An honorable discharge (but the certificate need not be filed unless called for.)

A service of not less than ninety days.

A permanent physical or mental disability not due to vicious habits. (It need not have originated in the service.)

The rates under the act are graded from \$6 to \$12 proportioned to the degree of inability to earn a support and are not affected by the rank held.

A pensioner under existing laws may apply under this one, or a pensioner under this one may apply under other laws, but he cannot draw more than ONE pension for the same period.

Fill up the blank carefully, and be particular to give the certificate number if you are a pensioner, and if not, the number of your application if you have made application.

Under act of July 1, 1890, all applications for pensions may be executed before a Clerk of Court, Notary Public, or any officer authorized to administer oaths who uses a seal, or who will have the certificate of a Clerk of Court attached to the application, showing his official character,

orig 626532 385

Prof. 12-4-90  
MLB

Act of JUNE 27, 1890.

# DECLARATION FOR INVALID PENSION.

Under Act of July 1, 1890, this application may be executed before a Clerk of Court, or before a Notary Public, or any officer authorized to administer oaths who uses a seal. It may also be executed before any officer who does not use a seal; but in such a case the certificate of a Clerk of Court *must be attached* to the paper, showing the official character of the executing officer. A general certificate on file in the Pension Office will not answer.

STATE OF Pennsylvania }  
COUNTY OF Bucks } 88.

On this 4th day of August, A. D.; one thousand eight hundred and ninety

personally appeared before me, a Justice of Peace of the 9th Court, a court of record within and for the county and State aforesaid, Jefferson Ely (Claimant's name here.)

aged 53 years, a resident of Lewis Mills county of Bucks (Name of county here.)

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

Jefferson Ely who was Enrolled on the 23rd day

of August 1864 in as private Co. to 2nd New Jersey Cavalry (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 Wm. C. Williams on the 7th day of June 1865

That he is Partially unable to earn a support by reason of Rheumatism (Partially or Wholly.)  
Pain (Here name the diseases or injuries from which disabled.)

That said disabilities are not due to vicious habits, and are to the best of his knowledge and belief **permanent**. That he has applied for pension under application No. 626502. That he (or has not) (If you have applied for pension state No. of claim here.)

is not a pensioner under Certificate No. (If a pensioner the Certificate number only need be given.)

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. B. CRALLE & CO, U. S. Pension Attorneys, Cralle Building, 108 C Street, N. W., Washington, D. C.,** his true and lawful attorneys to prosecute his claim; and he hereby agrees to allow said attorneys the lawful fee of Ten Dollars for their services when his pension is allowed.

That his Post Office address is York county of Bucks (Name of county)

State of Pennsylvania (Name of state)

Attest James T. Brown (1st witness sign here)  
Joseph T. Piler (2nd witness sign here)

Jefferson Ely (Claimant's Signature)

Also personally appeared

*John J. Cleary*

residing at

*Wentworth*

*New Jersey*  
*same place*

and

*Alfred W. Packer*

residing at

persons whom I certify to be respectable and entitled to credit, and who being by me duly sworn, say that they were present and saw

*Jefferson Ely*

the claimant sign his name (make his mark) to the foregoing declaration; that they have every reason to believe from the appearance of said claimant and their acquaintance with him that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim

*John J. Cleary*  
*A. W. Packer*

(Signature of Affiants.)

If Affiants sign by mark, two persons who can write sign here.)

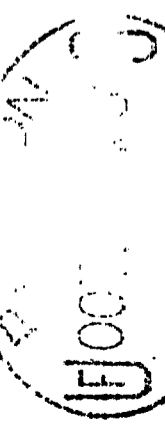
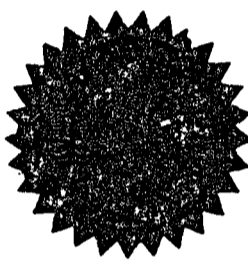
Sworn to and subscribed before me this *11* day of *July* A. D. 188*8*

and I hereby certify that the contents of the above declaration, &c., were fully made known and explained to the applicant and witnesses before swearing, including the words

erased, and the words

added; and that I have no interest, direct or indirect in the prosecution of this claim.

*John Pennade*  
Clerk of the *District Court of Kentucky*



**INVALID.**  
CLAIM FOR PENSION.  
**ORIGINAL.**

\_\_\_\_\_, Applicant.

Co. \_\_\_\_\_, Reg't.

Vols. *94*

Enlisted \_\_\_\_\_ 18

Discharged \_\_\_\_\_ 18

Filed by  
*H. S. Phillips*  
*Wentworth, N. J.*

# Declaration for an Original Invalid Pension.

This must be Executed before a Court of Record or some Officer thereof having Custody of the Seal.

State of mercer, County of mercer, ss:

ON THIS 4<sup>th</sup> day of October, A. D. one thousand eight hundred and eighty

personally appeared before me clerk of the Wentworth City District Court, a Court

of Record within and for the county and State aforesaid Jefferson City

aged 50 years, who, being duly sworn according to law, declares that he is the identical Jefferson

City who was ENROLLED on the 23<sup>rd</sup> day of

August, 1864, in Company "G" of the 2<sup>d</sup> regiment of U. S. Cavalry

commanded by Col. John S. Sudder and was honorably DISCHARGED at

Vicksburg, Miss. on the 29<sup>th</sup> day of June, 1865; That his

personal description is as follows: Age 50 years; height 5 feet 7 inches; complexion dark

hair dark; eyes blue. That while a member of the organization aforesaid, in the

service and in the line of duty at Abingdon near New Orleans in the State of Pa

on or about the 1<sup>st</sup> day of April, 1865, he contracted chills

with rheumatism affecting his shoulder

and arms, in consequence of flying out on

the damp ground, and being exposed.

That he was treated in hospitals as follows: In no hospital, but by reg-

imental surgeons

That he has not been employed in the military or naval service otherwise than as stated above

That he has not been in the military or naval service of the United States since the 29<sup>th</sup> day of June, 1865

That since leaving the service this applicant has resided in the county of Bucks

in the state of Pa., and that his occupation has been that of a laborer

That prior to his entry into the service above named he was a man of good, sound, physical health, being when enrolled a

laborer. That he is now greatly disabled

from obtaining his subsistence by manual labor by reason of his injuries, above described, received in the service of

the United States; and he therefore makes this declaration for the purpose of being placed on the invalid

pension roll of the United States. He hereby appoints with full power of substitution and revocation.

Henry W. Phillips of Wentworth, N. J.

his true and lawful attorney to prosecute his claim. That he has not received no applied for

a pension; that his residence is No. Yardley, Pa. street

and that his post office address is

Jefferson City

[Signature of Claimant.]

[Two witnesses who can write sign here.]

John J. Clay

Amacker

7000  
No. 626532

Ex'r. Department of the Interior,

BUREAU OF PENSIONS,

Jefferson Oly  
E 2 71 J Cav

January 31, 1888

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 Jefferson Oly who is claimed, enlisted May 22 1862 and served as private in E 2 71 J Cav also in Co.

and was discharged at Vicksburg Miss June 29, 1862.

While serving in Co. E 2 Reg't 71 J Cav he was disabled by Chills and Fever and rheumatism in Spring of 1862 at near New Orleans La.

also

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

Very respectfully,

John C Black,  
Commissioner

The Adjutant General, U. S. Army.

413  
10

10

3-019

(2) 4/13  
4/14

By

Adjutant General

R. C. DRUM,

[Lined area with a diagonal slash through it]

Respectfully returned to the Commissioners of Customs  
William Gray, a private subsidiary company of  
of Bremen, were sent to the Commissioners of Customs  
of Bremen, 1864, in Bremen, N.Y. for  
and original passed on file for March 1865, or for  
which (being) drawn up to April 20, 1865.  
No serial numbered out with a detachment of Co  
at Natchez, Miss. June 29, 1865  
Records of the office furnish an evidence of  
quantity

Washington, 13, 1888

ADJUTANT GENERAL'S OFFICE

War Department,

626,582

SARAH T ELY  
YARDLEY PA  
426869 JULY 26 WID

3-1081

DROP REPORT—PENSIONER

..... Cert. No. ....  
Pensioner .....  
Soldier .....  
Service .....  
Class ACT OF JULY 3, 1926 SEC. W

RECORD DIVISION

....., 192  
In the above-described case a declaration filed  
in this Division indicates that said pensioner died  
....., 19.....

*Chief, Record Division.*

50-11/4/27

FINANCE DIVISION

NOV 5 1927, 192

The name of the above-described pensioner who  
was last paid at the rate of \$ 50 per month  
to OCT 4 1927, 19....., has this day  
been dropped from the roll because of death

Oct. 12, 1927

*[Handwritten Signature]*

*Chief, Finance Division.*

# GENERAL AFFIDAVIT.

State of Pennsylvania, County of Bucks ss.

In the matter of pension claim of Sarah J. Ely, widow of Jefferson Ely, dec'd, P. & O. 2<sup>d</sup> n. g. car.; claim # 630667, act. 6/27/90;

ON THIS 23<sup>rd</sup> day of may A. D. 1896; personally appeared before me a

notary Public in and for the aforesaid County, duly authorized to administer oaths,

Sarah J. Ely aged 56 years, a resident of Yardley

in the County of Bucks State of Pennsylvania,

whose Post Office address is Yardley, Bucks Co., Penna. and

\_\_\_\_\_ aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

in the County of \_\_\_\_\_ State of \_\_\_\_\_

whose Post Office address is \_\_\_\_\_

and who, being duly ~~sworn~~ <sup>affirmed</sup> according to law, depose and say in relation to aforesaid case as follows:

that she is the claimant in the above-

[Note.—Affiants should state how they gain a knowledge of the facts to which they testify.]

named case; that she has never applied for pension other than by claim # 630667, above-mentioned, filed on the 28th day of March, 1896; that she has no means of support other than her daily labor; that she has no property, real, personal or mixed; that no person or persons are legally bound to support her. That the above testimony was all written in her presence, and only from her oral statements made on the 21<sup>st</sup> day of May, 1896, at Yardley, Pa., to O. J. Randall, and that in making the same she did not use and was not aided or prompted by any written or printed statement or recital prepared or dictated by any other person.

~~Further declare that \_\_\_\_\_ have no interest in said case and \_\_\_\_\_ not concerned in its prosecution.~~

Wm. W. Borden

Sarah J. Ely

*affirmed*  
State of Pennsylvania, County of Bucks

~~Sworn~~ to and subscribed before me this day by the within named affiant , and I certify that I read said affidavit to said affiant and acquainted her with its contents before she executed the same.

I further certify that I am in no wise interested in said case, nor am I concerned in its prosecution. *and that the affiant is reputable & entitled to credit.*

*Widney Leadwaller*  
[Signature.]

*Notary Public*  
[Official Character.]

[L. S.]

I certify that ..... Esq., who hath signed his name to the foregoing affidavit was at the time of so doing ..... in and for said County and State, duly commissioned and sworn ; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this ..... day of ..... 189

[L. S.]

Clerk of the .....

NOTE.—This should be sworn to before a CLERK of COURT, NOTARY PUBLIC or JUSTICE OF THE PEACE. If before a JUSTICE or NOTARY, then CLERK OF COUNTY COURT must add his certificate of character hereon and not on a slip of paper.

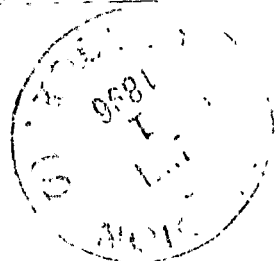
No. ....

ADDITIONAL EVIDENCE.

CLAIM OF

AFFIDAVIT OF

Filed by



# GENERAL AFFIDAVIT.

State of Pennsylvania, County of Bucks, SS.

In the matter of pension claim of Sarah J. Ely, widow of Jefferson Ely, dec'd, Pt. E. 2<sup>d</sup> N. J. Cav. claim # 632667, Act June 27, 1890,  
ON THIS 21<sup>st</sup> day of May A. D. 1896; personally appeared before me a

notary Public in and for the aforesaid County, duly authorized to administer oaths,

Joseph A. Vanhorn aged 76 years, a resident of Yardley,  
in the County of Bucks State of Pennsylvania,

whose Post Office address is Yardley, Bucks County, Penna. and  
aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

in the County of \_\_\_\_\_ State of \_\_\_\_\_

whose Post Office address is \_\_\_\_\_

and who, being duly <sup>affirmed</sup> sworn according to law, depose & say in relation to aforesaid case as follows:

That the said Sarah J. Ely lived with his

[NOTE.—Affiants should state how they gain a knowledge of the facts to which they testify.]

family in the capacity of a servant for the period of two years and within a year of the date of the claimant's marriage to soldier; that the said Sarah J. Ely had not been previously married; that he had known the soldier personally for forty years <sup>at the time of his death</sup> and that said soldier had not been previously married; that said Jefferson Ely and his wife Sarah J. Ely had continued in the married relation up to the date of the soldier's death, which occurred on the 18<sup>th</sup> day of March, 1896; that he was present at the funeral of said Jefferson Ely on the 22<sup>d</sup> day of March, 1896; that the claimant has not re-married since the death of her husband; that, from personal and intimate acquaintance with the claimant and her family, he is positive that she has no means of support other than her daily labor; and that the above testimony was all written in his presence, and only from his oral statements made on the 21<sup>st</sup> day of May, 1896, at Yardley, Pa., to O. J. Randall, and that in making the same he did not use and was not aided or prompted by any written or printed statement or recital prepared or dictated by any other person.

He further declare that he has no interest in said case and is not concerned in its prosecution.

O. J. Randall

Joseph A. Vanhorn

State of Pennsylvania County of Bucks, ss.

~~Sworn~~ <sup>affirmed</sup> to and subscribed before me this day by the within named affiant, and I certify that I read said affidavit to said affiant and acquainted him with its contents before he executed the same. I further certify that I am in no wise interested in said case, nor am I concerned in its prosecution, and that the witness is credible.

J. Sidney Caldwell  
[Signature.]  
Notary Public  
[Official Character.]

[L. S.]

I certify that ..... Esq., who hath signed his name to the foregoing affidavit was at the time of so doing ..... in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this ..... day of ..... 189

[L. S.]

Clerk of the .....

NOTE.—This should be sworn to before a CLERK of COURT, NOTARY PUBLIC or JUSTICE OF THE PEACE. If before a JUSTICE or NOTARY, then CLERK OF COUNTY COURT must add his certificate of character hereon and not on a slip of paper.

*Co-Heater,  
No. 1000, Manning,  
Death of ...  
Widow ...  
Ad ...  
229 }  
255-6 }  
N.P. }*

No. ....

ADDITIONAL EVIDENCE.

CLAIM OF

AFFIDAVIT OF

Filed by

# GENERAL AFFIDAVIT.

State of Pennsylvania, County of Bucks, ss.

In the matter of pension claim of Sarah J. Ely, widow of Jefferson Ely, dec'd, Pt. E. 2<sup>d</sup> N. G. Cav., claim # 630,667, act of June 27, 1890,

ON THIS 21<sup>st</sup> day of May A. D. 1896; personally appeared before me a Notary Public in and for the aforesaid County, duly authorized to administer oaths,

Algernon S. Cadwallader, aged 67 years, a resident of Yardley, in the County of Bucks State of Pennsylvania,

whose Post Office address is Yardley, Bucks Co., Penna. and \_\_\_\_\_ aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

in the County of \_\_\_\_\_ State of \_\_\_\_\_ whose Post Office address is \_\_\_\_\_

and who, being duly <sup>affirmed</sup> according to law, depose and say in relation to aforesaid case as follows:

He has had personal and continuous acquaint-  
[NOTE.—Affiants should state how they gain a knowledge of the facts to which they testify.]

ance with the claimant for fifty years (from her childhood), and with the deceased soldier for forty years; that neither the soldier nor the claimant had ever been previously married; that the said Jefferson Ely and his wife Sarah J. Ely had continued in the married relation up to the date of the soldier's death, which occurred on the 18<sup>th</sup> day of March, 1896; that the claimant has not been re-married since the death of her husband above-named; that, from personal knowledge of the claimant and her circumstances, he is positive that the claimant has no means of support other than her daily labor; that the above testimony was all written in his presence, and only from his oral statements made on the 21<sup>st</sup> day of May, 1896, at Yardley, Pa., to O. J. Randall, and that in making the same he did not use and was not aided or prompted by any written or printed statement or recital prepared or dictated by any other person.

He further declare that he has no interest in said case and is not concerned in its prosecution.

O. J. Randall

Algernon S. Cadwallader X  
Yardley Penna.  
[Signature of Affiant.]

State of Pennsylvania County of Bucks  
*affirmed*  
Sworn to and subscribed before me this day by the within named affiant , and I certify that I read said affidavit to said affiant and acquainted her with its contents before she executed the same.

I further certify that I am in no wise interested in said case, nor am I concerned in its prosecution.. *and that the affiant is credible, sentence interlined before signing.*

*Sidney Cardvallader*  
[Signature.]  
Notary Public  
[Official Character.]

[L. S.]

I certify that..... Esq., who hath signed his name to the foregoing affidavit was at the time of so doing..... in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this..... day of..... 189

[L. S.]

Clerk of the.....

NOTE.—This should be sworn to before a CLERK of COURT, NOTARY PUBLIC or JUSTICE OF THE PEACE. If before a JUSTICE or NOTARY, then CLERK OF COUNTY COURT must add his certificate of character hereon and not on a slip of paper.

*Marrriage*  
*229*  
*255-1-1*  
*M.P.*



No. ....  
ADDITIONAL EVIDENCE.  
.....  
CLAIM OF  
.....  
AFFIDAVIT OF  
.....

Filed by  
*[Signature]*  
Yeo & Inkens, Prs., 613 Walnut St., and 23 N. 13th St., Phila.

# GENERAL AFFIDAVIT.

State of Pennsylvania, County of Bucks, ss.

In the matter of pension claim of Sarah J. Ely, widow of Jefferson Ely, dec'd, P. E. 2<sup>d</sup> n. g. Cav, claim #630,667, act June 27, 190;

ON THIS 29<sup>th</sup> day of May A. D. 1896; personally appeared before me a Sotary Public in and for the aforesaid County, duly authorized to administer oaths,

Attie Schofield aged        years, a resident of Yardley, in the County of Bucks, State of Pennsylvania,

whose Post Office address is Yardley, Bucks Co., Pa. and

       aged        years, a resident of        in the County of        State of       

whose Post Office address is       

and who, being duly <sup>sworn</sup> according to law, depose and say in relation to aforesaid case as follows:

She is the daughter of the late J. J. Schofield,

[NOTE.—Affiants should state how they gain a knowledge of the facts to which they testify.]

Esq., who performed the marriage ceremony of Jefferson Ely and Sarah J. Riley on the 8th day of September, 1863; that she was present at and witnessed the ceremony whereby the said Jefferson Ely and Sarah J. Riley were united in matrimony; that her signature as a witness appears on the marriage certificate given by her father the said J. J. Schofield, Esq., to the said Jefferson Ely and wife; that her father, W. J. Schofield, is deceased; and that the above testimony was all written in her presence and only from her oral testimony or statements made on the 22<sup>d</sup> day of May, 1896, at Yardley, Pa., to O. J. Randall, and that in making the same she did not use and was not aided or prompted by any written or printed statement or recital prepared or dictated by any other person.

She further declare that she has no interest in said case and is not concerned in its prosecution.

William R. Hoffman

Attie Schofield



Also appeared James J. Colson and Jerry E. Harper who, being duly sworn, make the following statement, each for himself, that they know the claimant herein and that their answers to the following questions are true:

- 1. Did pensioner (if a soldier or sailor) leave a widow or a minor child under age of sixteen years surviving? no
- 2. When did the pensioner die? October 12th, 1927
- 3. Did pensioner leave any property? If so, state its character and value none
- 4. Our means of knowledge of the above statements made by us are: We knew the deceased pensioner for 15 years and 3.5

Name James J. Colson Name Jerry E. Harper  
 P. O. Address Yardley Penn P. O. Address Yardley Penn  
 Subscribed and sworn to before me, this 4th day of November A. D. 1927;

and I certify that the contents of the foregoing application were fully made known and explained to the claimant and witnesses before swearing, that I have no interest, direct or indirect, in the prosecution of this claim, and I further certify that the reputation for credibility of the witnesses whose signatures appear above is

[L. S.]

T. Sidney Cadwallader  
 (Signature)  
Notary Public  
 (Official character)  
Yardley Penn  
 (P. O. address)

STATEMENT OF ATTENDING PHYSICIANS

Give pensioner's name in full Sarah T. Ely  
 Give date of commencement of pensioner's last sickness Aug. 10 - 1927  
 Give date of pensioner's death Oct. 12 - 1927  
 From what date did the pensioner require the regular and daily attendance of another person constantly until death? Jan. 6 - 1921  
 During what period did you attend the pensioner? Off and on since Jan. 1918  
 State nature of disease from which pensioner died Chronic Nephritis

Give name of any other physician who attended the pensioner in last sickness None

Does your bill include a charge for all medicine furnished the pensioner during last sickness? Yes  
 Has your bill been paid; if so, by whom? No

Give the name of each person who acted as nurse, and mention any other facts within your knowledge which would be helpful in adjusting this claim for reimbursement: Her daughter, Emma Ely

I certify that the foregoing statement is correct.  
Nov. 1, 1927  
 19

[Signature]  
 Attending Physician.  
[Signature]  
 Attending Physician.

READ THE INSTRUCTIONS ON BACK OF THIS BLANK BEFORE USING IT

3-044

## APPLICATION FOR REIMBURSEMENT

This form not to be used if the deceased pensioner left a widow or minor children under sixteen years of age

STATE OF Pennsylvania  
COUNTY OF Bucks } ss:

On this 4th day of November, A. D. 1927, before me, the undersigned, personally appeared Emma E. Ely, aged 54 years, a resident of Yardley, County of Bucks, State of Pennsylvania, who makes the following declaration as an application for, and claim is hereby made for, reimbursement from the accrued pension for expenses paid (or obligation incurred) in the last sickness and burial of Sarah J. Ely, who was a pensioner of the United States by certificate No. 426 869 and who DIED October 12th, 1927, at Yardley, Penn and was buried at Greenwood, Trenton N.J.

That the answers to questions propounded below are full, complete, and truthful to the best of my knowledge, information, and belief, and that no evidence necessary to a proper adjustment of all claims against the accrued pension is suppressed or withheld.

1. What was the full name of the deceased pensioner? Sarah J. Ely
2. In what capacity was decedent pensioned? (As soldier or sailor, or as a widow, minor child, dependent relative, etc.)  
Widow
3. If decedent was pensioned as a soldier or sailor—
  - (a) Was he ever married? (Answer yes or no.)
  - (b) How many times, and to whom?
  - (c) If married, did his wife survive him? (Answer yes or no.)
  - (d) If so, is she still living? (Answer yes or no.)
  - (e) If not living, give full names and dates of death of all wives.
  - (f) Was he ever divorced? (Answer yes or no.)
  - (g) If so, is the divorced wife still living? (Answer yes or no.) (If living, a copy of the decree of divorce must be filed.)
  - (h) If not living, give her full name and the date of her death.
4. Did pensioner leave a child under 16 years of age? (Answer yes or no.) no
5. Is any such child still living? (Answer yes or no.)
6. Were any sick or death benefits paid on pensioner's account? If so, give name of society and amount paid. none ✓
7. Was there insurance (life, accident, or health) in force on life of pensioner at time of death? (Answer yes or no.) yes ✓
8. If so, give the name of each company in which a policy was carried and the amount in which each policy was written.  
Metropolitan Life Ins. \$158<sup>00</sup>/<sub>100</sub>
9. Who was the beneficiary named in each policy? Emma E. Ely
10. What was the relation of each beneficiary to the pensioner? daughter
11. Were the premiums paid by the deceased pensioner? no
12. If not paid by the deceased pensioner, state the amount of premiums paid by each person who made payment on that account.  
Emma E. Ely daughter paid 20¢ per week for to past 25 years