

ACT OF JUNE 27, 1890.

# WIDOW'S PENSION.

327720  
N.Y. City

Claimant *Margaretha Zimmman*

Soldier *John Zimmman*

P. O. *Monticello Monroe*

Rank *Leader of Band Co. L.*

County *Orange Sullivan*, State *New York*

Regiment *56th N.Y. Vol Inf.*

Rate, \$8 per month, commencing *July 11th*, 189*0*, and \$2 per month additional for each child, as follows:

Born, .....	18	Commencing .....	18
Sixteen, .....	18	Commencing .....	18
Born, .....	18	Commencing .....	18
Sixteen, .....	18	Commencing .....	18
Born, .....	18	Commencing .....	18
Sixteen, .....	18	Commencing .....	18
Born, .....	18	Commencing .....	18
Sixteen, .....	18	Commencing .....	18
Born, .....	18	Commencing .....	18
Sixteen, .....	18	Commencing .....	18
Born, .....	18	Commencing .....	18
Sixteen, .....	18	Commencing .....	18
Born, .....	18	Commencing .....	18
Sixteen, .....	18	Commencing .....	18

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

All pension to terminate ....., 189..., date of .....

## RECOGNIZED ATTORNEY:

Name *Peter C. Palen*

Fee \$ *10.00* Agent to pay.

P. O. *Monticello N.Y.*

Articles Filed ....., 189...

## APPROVALS:

Submitted for *admission*, *Mar 11*, 189*2*, *E. J. Brunson*, Examiner.

Approved for *admission*

*McH. 14*, 189*2*

*E. Wood*, Legal Reviewer.

The soldier was *not* pensioned at \$ ....., per month for .....

Enlisted *October 3d*, 18*64* Soldier's app'n filed *none*, 18 .....

*Was* honorably disch'd *Oct. 17th*, 18*65* Clt's app'n under other laws *none*, 18 .....

Re-enlisted *not*, 18 ....., Former marriage of *none*, 18 .....

..... honorably disch'd ....., 18 ....., Death of former ....., 18 .....

Died *Sept 28th*, 18*73*. Clt's marriage to soldier *Aug 17*, 18*47*.

Declaration filed *July 11*, 18*90*. Clt *not* remarried ....., 18 .....

Claimant is *no* without other means of support than her daily labor.

*Claimant writes German*

*no M.C.*

Act June 27, 1890.

(3-232.)

No. 327720.

DEAD.

Margaretha Zimmerman

Widow of

John Zimmerman

Rank Music.

Company "I"

Regiment 56 ny Vol Inf.

Rate per Month, \$ 8.

Commencing July 11, 1890.

Ending 1891

New York City Agency.

Issued March 17, 1892.

Mailed " 26, 1892.

Fee, \$ 10.

DROPPED

July 6 1904  
Death Cert.

Reimbursement Act Mar. 2, 1895.  
Accounting Officer's Certificate  
No. 44487 for \$ 14-93 Army  
Appropriation 1904 Returned to  
Interior Department for filing  
SEP 2- 1904 J. C. Finance. Div.

STATE OF NEW YORK,  
Orange County Clerk's Office, } ss.

I, William G. Taggart, Clerk of said County, and the County Court of said County (a Court of Record), DO HEREBY CERTIFY, That

*Wm. Howell*

whose name is subscribed to the annexed affidavit was, at the time of taking the same, a JUSTICE OF THE PEACE in and for said County, duly elected and qualified, and having full power to take the same; and further, that I am well acquainted with the handwriting of said JUSTICE, and verily believe that the signature subscribed to the said affidavit is genuine.

In Witness Whereof, I have hereunto subscribed my name and affixed the

Seal of said Court and County, this 4 day of

June 189 2

*W. G. Taggart* Clerk.



State of New York }  
County of Orange } S.S.:

In the matter of the widow's  
Claim for Pension of Margaret Zimmerman  
widow of John Zimmerman Claim No 434,100  
Margaret Zimmerman being duly sworn says  
that she is the claimant - that after her late  
husband's discharge from Co "L" 56, Regt N.Y.N  
Infantry on October 17 1865 he never was employed  
in the military or Naval service of the U.S.  
that her P.O. address is Monroe Orange  
Co: N.Y. Care of George A. Kenzie, No one legally bound  
to support me ~~Margaret Zimmerman~~.

Subscribed and sworn to before me this Second  
day of January 1892 and I hereby certify  
that I acquainted <sup>with</sup> the affiant with the con-  
-tents of the foregoing before execution & that  
she is personally known to me & is a credible  
person & that I have no interest direct or  
indirect in the prosecution of this claim

Wm. H. Corral  
Justice of the Peace  
in & for Said County



In claim of  
Margaret Zimmerman  
Widow of John Zimmerman

Child  
No sub-servient  
No one bound for  
her support  
For Widows Pension

Affidavit of  
Claimant

PETER E. PALEN,  
ATTORNEY,  
MONTICELLO, - N. Y.

98777

229608

1891

Write nothing above this line.

(3-060 a.)

# MILITARY SERVICE.

NAME OF SOLDIER:

*John Zimmerman*

*Eastern* Div. Bureau of Pensions,

*S.M.* Ex'r. *March 14, 1891*

No. *434-100*

*Widow*

SIR:

It is alleged that the above-named man enlisted *5*

*Oct*, 18*64*, and served as a

in Co. *L*, *56* Reg't *N.Y. Infy*

also as a \_\_\_\_\_ in Co. \_\_\_\_\_ Reg't

\_\_\_\_\_, and was discharged at

on *Oct 17*, 18*65*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

No. of prior claim \_\_\_\_\_

The War Department will please furnish an official statement in this case, showing date of enrollment and date and mode of termination of service.

Very respectfully,

*Andrew Davidson*

Commissioner.

THE OFFICER IN CHARGE OF THE  
RECORD AND PENSION DIVISION,  
WAR DEPARTMENT.

0-4

# War Department,

Record and Pension Division,

MAR 25 1891

Respectfully returned to the

COMMISSIONER OF PENSIONS.

The rolls show that

*John Zimmerman*  
mentioned in the preceding indorsement, was enrolled

*Oct 3*, 186*4* and *M.O.*

*Oct 17*, 186*5*



BY AUTHORITY OF THE SECRETARY OF WAR:

*J. Ainsworth*  
Captain and Asst Surgeon, U. S. Army.

Per *J*

# NEIGHBORS AFFIDAVIT.

Please read these instructions before filling up your affidavit.

State of New York County of Sullivan SS:  
In the matter of the claim of Margaret Zimmerman <sup>Widow of John Zimmerman</sup> late a  
Private in Company S of the 56 Regiment of N.Y. Inf. Vols.  
Dwight H Beebe aged 55 years, a resident of town of Thompson

NEIGHBORS:— Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

aged \_\_\_\_\_ years, a resident of \_\_\_\_\_  
whose Post Office address is Monticello Sullivan Co NY  
who being duly sworn, declare in relation to aforesaid case as follows:

I was a member of Co F 56 N.Y. Inf. & personally acquainted with John Zimmerman he was a member of Co S 56 N.Y. & then was detailed as leader of the band of 56 N.Y. for a while he enlisted on or about Fifth October 1864, and was discharged on the 14th day of October 1865 with his regiment & honorably

State your source of information concerning Claimant.

I know these facts from personal knowledge

I have no interest whatever in his claim, and am not related to claimant.

Two Witnesses when signed by mark: {

Dwight H Beebe

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 separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his Jurat.

Sworn to and subscribed before me this 20 day of February 1891  
at Monticello in the County of Sullivan

State of New York I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of full credit as a witness, and that the contents of the above affidavit were made known to him before execution.

Chas Smith  
Notary Public

Certificate filed

STATE OF ..... }  
COUNTY OF ..... } ss.

I HEREBY CERTIFY that ..... before whom the foregoing affidavit was made, was at the execution thereof, a ..... in and for the County of ..... duly authorized to administer oaths, and that his signature and State of ..... 188  
'hereto is genuine. His Commission was dated ..... 188  
and will expire ..... 188

(Official Signature.)

*Armas* TESTIMONY.  
IN THE CLAIM OF  
*Margaret Zimmerman*  
*widow of*  
*John Zimmerman*  
*Co. D 856 47th V*  
For *Widows Pension*  
No. *434.100*

AFFIDAVIT OF  
*Dwight H. Bube*

FILED BY

PETER E. PALEN,  
ATTORNEY, *for claimant*  
MONTICELLO, - N. Y.



*Boeckman*  
*Date of*

# NEIGHBORS AFFIDAVIT.

Please read these instructions before filling up your affidavit.

State of New York County of Sullivan SS:  
In the matter of the claim of Margaret Zimmerman widow of John Zimmerman late a  
private in Company L of the 56 Regiment of N Y Inf Vols.  
Andrew Webber aged 46 years, a resident of Monticello NY  
aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

NEIGHBORS:— Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

whose Post Office address is Monticello Sullivan County NY.

who being duly sworn, declare in relation to aforesaid case as follows:

I was a member of Co K 56 NY Inf & personally acquainted with John Zimmerman he was a member of Co L 56 N.Y. & then was detailed as leader of the Band of the 56 N.Y. - he enlisted about October 1864 and was discharged on or about the 14<sup>th</sup> day of October 1865 with his regiment honorably

State your source of information concerning Claimant.

I know these facts from personal knowledge

I have no interest whatever in his claim, and am not related to claimant.

Andrew Webber

Two Witnesses when signed by mark: }

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 separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his Jurat.

Sworn to and subscribed before me this 24<sup>th</sup> day of February 1881  
at Monticello in the County of Sullivan

State of New York I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of full credit as a witness, and that the contents of the above affidavit were made known to him before execution.

Wm. E. Smith  
Notary Public

Certificate filed

STATE OF ..... } ss.  
COUNTY OF .....

I HEREBY CERTIFY that ..... before whom the forego-  
ing affidavit was made, was at the execution thereof, a .....  
..... in and for the County of .....  
and State of ..... duly authorized to administer oaths, and that his signature  
'hereto is genuine. His Commission was dated ..... 188 ;  
and will expire ..... 188 .

.....  
(Official Signature.)

*Comrade* TESTIMONY.

IN THE CLAIM OF

*Margaret Zimmerman*  
*widow of*  
*John Zimmerman*  
*C. S. 56 N. 7. N.*  
For *Widows Pension*

No. *434,100*

AFFIDAVIT OF

*Andrew Webber*  
*Comrade as to*  
*Discharge*

FILED BY

PETER E. PALEN,  
ATTORNEY, *for claimant*  
MONTICELLO, N. Y.



# NEIGHBORS AFFIDAVIT.

Please read these instructions before filling up your affidavit.

State of New York County of Sullivan SS:

In the matter of the claim of Margaret wife of John Zimmerman late a  
private in Company of the 56 Regiment of N.Y. Infy Vols.

James I Mitchell aged 48 years, a resident of Monticello  
 aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

whose Post Office address is Monticello N.Y.

who being duly sworn, declare in relation to aforesaid case as follows:

NEIGHBORS:—Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

*I am engaged in business or dealer in furniture & undertaker. I knew claimant's husband he was a teacher of music at the Monticello Academy. I officiated as undertaker & buried claimant's husband in the town of Thompson N.Y. on or about September 1873. I have known the claimant's husband for years he came here first then his family came. He always recognized claimant as his wife & she was so recognized in this community by neighbors. she has recognized his widow to the best of my knowledge & I know her well.*

I know these facts from personal knowledge & observation

State your source of information concerning Claimant.

I have no interest whatever in his claim, and am not related to claimant.

Two Witnesses when signed by mark: J. I. Mitchell

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 separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his Jurat.

Sworn to and subscribed before me this 15<sup>th</sup> day of Aug 1881.  
 at Monticello in the County of Sullivan

State of New York I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of all credit as a witness, and that the contents of the above affidavit were made known to him before execution.

J. Madenlovan  
 Notary Public

STATE OF ..... }  
COUNTY OF ..... } ss.

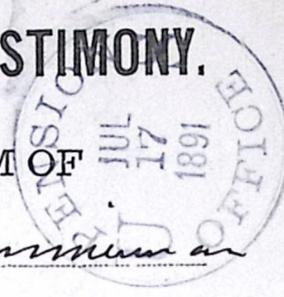
I HEREBY CERTIFY that ..... before whom the foregoing affidavit was made, was at the execution thereof, a ..... in and for the County of ..... and State of ..... duly authorized to administer oaths, and that his signature hereto is genuine. His Commission was dated ..... 188 ; and will expire ..... 188 .

(Official Signature.)

*Indentured* TESTIMONY.

IN THE CLAIM OF

*Margaret Zimmerman an*



For *Widows Pension*

No. *434,100*

AFFIDAVIT OF

*James T. Mitchell*

FILED BY

PETER E. PALEN,  
ATTORNEY,  
MONTICELLO, - N. Y.

*Death of  
Richard W.  
1873*

[3-218 a.]

*Brunson* Ex'r.

No. *434100*

Act of June 27, 1890.

*Margaret Zimmerman*  
*Monticello New York.*  
*Widow*

*John Zimmerman*  
*Box 2 "56" N Y W. Ind.*

Died at \_\_\_\_\_  
*Sept 28 - 1873.*

*No.* other claim.

*Sept 27,* 18*91.*

Numerical No. *15896*

Clerk.

Application filed: *July 11*, 18*90.*

Attorney: *Peter E. Calen.*

P. O. *Monticello*  
*N. Y.*

*M. E. C.*

Oct 15/90 Norfolk Is.

ME.

March 24/91 Call on A. G. S. M.

VT. May 9/91 to Atty Palen for date of soldier's death marriage & widowhood

MASS. Dec 14/91 to Atty Palen for full value of farm E. J. B

R. I. Whether any person has been legally bound to support claimant & for sub service E. J. B

N. Y.

N. J.

DEL.

No.







7. vauent Zimmermann, fast und würdig  
 fiska all, Oktober in Wirtstadt nachgefragt  
 moment als: fiska des fiska Zimmermann,  
 welche nach gefasster Beschlusse gegenwärtige  
 Akt mit mir auch den beauftragten fiska  
 unterzeichnete haben.

Die fiska: Die fiska: Der fiska:  
 fiska Zimmermann. Oberfiska Legat. fiska:  
 Margaretha Legat. fiska Legat. fiska:  
 A. Zimmermann. fiska Legat.  
 A. fiska Zimmermann. fiska Zimmermann.

fiska richtigem fiska.  
 Heiselheim, am 3. Juni 1891.  
 Großherzoglich bürgermeister Heiselheim.  
 Speis



Die vorstehende Unterschrift der Bürgermeisters und  
 Hauptbeamten der Gemeinde Heiselheim, Deutsches  
 Reich, Bundesstaat Hessen, Provinz Rheinhesse wird  
 hiermit als ächt beglaubigt

Heidelheim, 4 Juni 1891  
 Großherzogliches hessisches Amtsgericht

Speis  
 Margaretha Zimmermann  
 fiska Zimmermann  
 No 434, 100

PETER E. PALEN,  
 ATTORNEY,  
 MONTICELLO, - N. Y.



✓  
PENSIONER DROPPED.

United States Pension Agency,  
NEW YORK CITY, N. Y.

JUL 6 1904

Certificate No. 327,720

Class Army Act 27/90 Widow

Pensioner Margaretha Zimmermann

Soldier John Zimmermann

Service Mus G 56 Reg I. C.

The Commissioner of Pensions.

SIR: I have the honor to report that the  
above-named pensioner who was last paid

at \$ 5, to May 4, 1903.

has been dropped because of reported  
death date not given  
on Auditor's card  
dated July 1, 1904.

Very respectfully,

  
United States Pension Agent.

NOTE.—Every name dropped to be thus reported at once,  
and when cause of dropping is death, state date of death  
when known.



Proof of Marriage

Case of

Margaret Zimmerman

Widow of

John Zimmerman

C L 56 N 70

No 434,100

Marriage

Aug 17 1847



PETER E. PALEN,  
ATTORNEY,  
MONTICELLO, - N. Y.

# NEIGHBORS AFFIDAVIT.

Please read these instructions before filling up your affidavit.

State of New York County of Sullivan SS:  
In the matter of the claim of Margaret Zimmerman widow of John Zimmerman late a  
Private in Company B of the 56 Regiment of N Y Inf Vols.  
Francis G. Severock aged \_\_\_\_\_ years, a resident of New York city

NEIGHBORS:— Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

aged \_\_\_\_\_ years, a resident of \_\_\_\_\_  
whose Post Office address is 145 No 105 street west New York city

who being duly sworn, declare in relation to aforesaid case as follows: I have known the  
claimant ever since she came to this County  
her husband was a teacher of music in the  
Academy under my charge both at Liberty N.Y.  
and at Monticello N.Y. before his family came  
to this County, after claimant & the children  
came to this County they came to Monticello and  
lived just out of the village, and they lived in  
this vicinity up to the time of his death, the claim-  
ant was always recognized by her deceased hus-  
band as his wife and was so recognized in  
this community, has remained in widow to best of my  
knowledge & had she remarried I think I certainly would know of it  
I know these facts from personal acquaintance

State your source of information concerning Claimant.

I have no interest whatever in his claim, and \_\_\_\_\_ am \_\_\_\_\_ not related to claimant.

Francis G. Severock

Two Witnesses when signed by mark: \_\_\_\_\_

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 separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his Jurat.

Sworn to and subscribed before me this 14 day of July 1891.  
at Monticello in the County of Sullivan

State of New York I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of all credit as a witness, and that the contents of the above affidavit were made known to him before execution.

Chas E. Ellis  
Notary Public

Certificate filed

STATE OF ..... }  
COUNTY OF ..... } ss.

I HEREBY CERTIFY that ..... before whom the foregoing affidavit was made, was at the execution thereof, a ..... in and for the County of ..... duly authorized to administer oaths, and that his signature and State of ..... 188 ,  
'hereto is genuine. His Commission was dated ..... 188 ,  
and will expire ..... 188 .

(Official Signature.)

Neighbour TESTIMONY.

IN THE CLAIM OF

Margaret Zimmerman

For Widows Pension

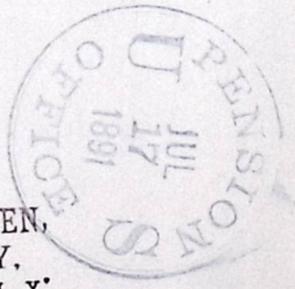
No. 434,100

AFFIDAVIT OF

Francis L. Severock

FILED BY

PETER E. PALEN,  
ATTORNEY,  
MONTICELLO, - N. Y.



*Cohabitation  
& widowhood*

*APPROPRIATE TO THE*

# NEIGHBORS AFFIDAVIT.

Please read these instructions before filling up your affidavit.

NEIGHBORS:— Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

State your source of information concerning Claimant.

State of New York County of Sullivan SS: Zimmerman  
 In the matter of the claim of Margaret Zimmerman widow of John late a private in Company of the 56 Regiment of N.Y. Inf. Vols.  
William H. Carey aged 72 years, a resident of town of Thompson  
 aged \_\_\_\_\_ years, a resident of \_\_\_\_\_  
 whose Post Office address is Monticello Sullivan Co. N.Y.

who being duly sworn, declare in relation to aforesaid case as follows: I knew claimant & her husband; soon as he brought his family to this County he lived near neighbors of me some 200 to 300 ft between our houses; he had been an instructor of music in the Academy at Monticello some year before he brought his family here. He introduced the claimant as his wife & recognized her as such & was so recognized in this community. They had two children when they moved here; that after his death she remained his widow to the best of my knowledge & my acquaintance with her & her family being intimate I think I certainly would know of it or heard of it had she remarried.  
 I know these facts from personal knowledge

I have no interest whatever in his claim, and am not related to claimant.

Two Witnesses when signed by mark: {

Wm. H. Carey

Sworn to and subscribed before me this 13<sup>th</sup> day of July 1891  
 at Monticello in the County of Sullivan

State of New York I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of full credit as a witness, and that the contents of the above affidavit were made known to him before execution. th word "Zimmerman" inserted  
Shud Hoover  
Sheriff of the Peace

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 separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his Jurat.

STATE OF ..... } ss.  
COUNTY OF .....

I HEREBY CERTIFY that ..... before whom the foregoing affidavit was made, was at the execution thereof, a ..... in and for the County of ..... duly authorized to administer oaths, and that his signature and State of ..... 188  
hereto is genuine. His Commission was dated ..... 188  
and will expire ..... 188

(Official Signature.)

Neighbors TESTIMONY.  
IN THE CLAIM OF  
Margaret Zimmerman  
For Widows Pension  
No. 434,100

AFFIDAVIT OF  
W-H Curry

FILED BY  
PETER E. PALEN,  
ATTORNEY  
MONTICELLO, - N. Y.  
MONTICELLO PENSION  
JUL 17 1891

Cohabitation  
Widowhood

GENERAL AFFIDAVIT.

State of New York }  
County of Sullivan } SS.

In the matter of Margaret Zimmerman widow of  
John Zimmerman late of Co B 56th Inf  
Personally came before me, a Justice of the Peace in and for aforesaid County  
and State, Francis G. Serenoak, aged 59 years  
and Monticello, aged          years  
citizen of the Town of Monticello, County of Sullivan, State of  
New York  
Post Office Address.

well known to me to be reputable and entitled to credit, and who,  
being duly sworn, declare in relation to aforesaid case, as follows:

I was acquainted with  
claimant's husband for at least fifteen years before  
his death. He was always in debt and never accumulated  
any property, and at his death he left his family virtually  
destitute. His wife held the title to a small farm which  
was partially paid for by money of her own. At the time  
of his death the amount due upon the mortgage was  
I think fully equal to the sum which would have  
been realized for the property had the mortgage been  
at that time foreclosed.

Claimant's husband had been for many  
years a teacher of music in the institution under  
my charge, and for several years after his death  
I assisted his widow in providing for her family  
she not being able by her own personal exertions and  
the help of a small pension received from the father in  
Germany to provide for them.

After the marriage of one of her daughters she  
and her husband took the place, and since that time  
the claimant has been dependant upon the Charity  
of said daughter, who now has a family of her own  
to support.

I further declare that I have no interest in said case, and am not concerned in  
its prosecution.

1 } Signature of Affiants. { Francis G. Serenoak  
2 }

NOTE.—In the execution of papers and evidence, whenever a person or witness signs by mark (+), two persons who can write must attest the signature by signing their names opposite.  
The official before whom papers are executed is not a competent witness to a mark.

Sworn to and subscribed before me this day by the above named affiant ; and I certify that I read said affidavit to said affiant , and acquainted h<sup>er</sup> with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me; that he is a creditable person and so reputed in the community in which h<sup>e</sup> reside

Witness my hand and official seal this 6<sup>th</sup> day of August ..1899

Sign here John P. Rowan  
*Justice of the Peace*

ADD SEAL HERE.

NOTE.—Should this be sworn to before any other officer than a CLERK OF COURT then the proper CLERK OF COURT must add his certificate of character on the back hereof, and not on a separate slip of paper.

STATE OF....., COUNTY OF....., ss.

I, ....., Clerk of the County Court in and for aforesaid County and State, do certify that ....., Esq., who hath signed his name to foregoing affidavit, was at the time of so doing a.....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.....18

Clerk of the.....



If a Notary Public (or Justice of the Peace) will put his signature and seal impress (if he has one) on a sheet of paper, and a Clerk of Court will certify that they are genuine, stating when his commission was dated and when it will expire, he can execute papers to be used in ONE DEPARTMENT ONLY during his term of office without authentication by Clerk of Court. Such Certificate for each Department where many authentications are required, will save much expense.

Several papers executed before one N. P. or J. P. on the same date need Co. Clerk's Certificate, on one only, if all are to be used in one case.

Write an affidavit just as you would write a letter, stating all the facts, circumstances, dates and places, as near as you can remember, and if of your own personal knowledge and observation, and state how you know what you say to be true.

No. 434, 100  
**GENERAL AFFIDAVIT.**  
 CASE OF  
 Margaret Zimmerman  
 Mother of  
 John Zimmerman  
 C. L. 56 A. J. S. D. M.  
 FOR  
 Widows Pension  
 Act of June 27/1890  
 Dependence  
 AFFIDAVIT OF  
 Prof. F. A. Steverock  
 FILED BY  
 Peter J. Palm, Atty  
 Marshall, Ky.

# NEIGHBORS AFFIDAVIT.

Please read these instructions before filling up your affidavit.

State of New York County of Sullivan SS:

In the matter of the claim of Margaret Zimmerman widow of John Zimmerman late a Private in Company E of the 56 Regiment of N Y Buff Vols.

Dewitt H Beebe aged 54 years, a resident of town of Thompson  
Sullivan Co NY aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

whose Post Office address is Monticello Sullivan Co NY

who being duly sworn, declare in relation to aforesaid case as follows:

*I have known claimant for over twenty years. Her husband was improvident man never accumulating any property. He left his widow destitute except a small rough farm of about 50 acres which was as I understand I bought with her money & was mortgaged at at the time of his death for about all it was worth.*

*That since death of claimant's husband her daughter Barberin Kimmie has taken her to live with them, said daughter her husband have taken and managed the place, that the farm is so small & rough that Mr Kimmie work around by day works away from the place to support himself & family. that the farm would scarcely rent for \$30. per year. & claimant is & has been for years dependent on her daughter's charity for her support.*

*Claimant is & has been for years dependent on her daughter's charity for her support - being a neighbor, & being personally acquainted with them all & the circumstances, claimant is dependent upon her daily labor & charity of her daughter for her support. I have no interest whatever in his claim, and am not related to claimant.*

NEIGHBORS:—Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent, 1/8, 1/4, 1/2, 3/4, did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity, 1/8, 1/4, 1/2, 3/4, has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

State your source of information concerning Claimant.

Dewitt H Beebe

Two Witnesses when signed by mark: {

Sworn to and subscribed before me this 14<sup>th</sup> day of July 1890  
at Monticello in the County of Sullivan

State of NY I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of full credit as a witness, and that the contents of the above affidavit were made known to him before execution.

Shelton Ross  
Justice of the Peace

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 separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his Jurat.

STATE OF ..... }  
COUNTY OF ..... } ss.

I HEREBY CERTIFY that ..... before whom the foregoing affidavit was made, was at the execution thereof, a ..... in and for the County of ..... and State of ..... duly authorized to administer oaths, and that his signature hereto is genuine. His Commission was dated ..... 1881 and will expire ..... 1881

.....  
(Official Signature.)

*Neighbours* TESTIMONY.  
IN THE CLAIM OF  
*Margaret Zimmerman*  
*widow of*  
*John Zimmerman*  
*of S. W. 7th St*  
For *Widow's Pension*  
No. *434,100*

AFFIDAVIT OF  
*Dwight H. Bube*  
*Dependence*

FILED BY  
*Chas. E. Palm*  
*Atty for claimant*  
*Monticello*



# NEIGHBORS AFFIDAVIT.

Please read these instructions before filling up your affidavit.

State of New York County of Orange SS:  
 In the matter of the claim of Margaret Zimmerman widow of John Zimmerman late a  
private in Company Lo of the 56 Regiment of N.Y. Inf. Vols.  
George Keinnie aged 45 years, a resident of Monroe Orange Co. N.Y.  
 aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

NEIGHBORS:— Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

whose Post Office address is Monroe Orange Co. N.Y.  
 who being duly sworn, declare in relation to aforesaid case as follows: I am personally acquainted with claimant. I married her daughter, and she makes it her home with us and has ever since her husband's death, I am under no legal obligation to support her since her late husband's death, neither is my wife, but we have given her a home out of charity.

The farm she owns was not at the time of her husband's death in condition to support her and would not rent for scarcely anything, the farm has been very much improved after his death and it is worth the sum of \$800., and would rent for \$40. a year now and the taxes have to be paid out of that, and they are some \$11. a year.

I am intimately acquainted with claimant & to the best of my knowledge there is no one legally bound to support her since her husband's death, if there was I certainly think I would know of it.  
 I know these facts from personal acquaintance

State your source of information concerning Claimant.

I have no interest whatever in his claim, and am not related to claimant.

George A. Keinnie  
 Two Witnesses when signed by mark: \_\_\_\_\_

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 separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his Jurat.

Sworn to and subscribed before me this Second day of January 1892  
 at Bromy Grove in the County of Orange

State of New York I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of all credit as a witness, and that the contents of the above affidavit were made known to him before execution.  
Wm. H. Howell  
Justice of the Peace  
for said County

STATE OF New York }  
COUNTY OF Orange } ss.

I HEREBY CERTIFY that Sam. W. Goodell before whom the foregoing affidavit was made, was at the execution thereof, a Justice of the Peace in and for the County of Orange and State of New York duly authorized to administer oaths, and that his signature thereto is genuine. His Commission was dated January 4 1889 and will expire December 31 1889.

Wm. H. Ellwell  
(Official Signature)  
Clk. of Orange Co.

Neighbours TESTIMONY.

IN THE CLAIM OF

Margaret Zimmerman

For Widows Pension

No. \_\_\_\_\_

AFFIDAVIT OF

George A. Kinnet  
value of farm & income  
no one really bound  
for her support

FILED BY

PETER E. PALEN,  
ATTORNEY,  
MONTICELLO, N. Y.



RECEIVED BY THE PENSION OFFICE

# NEIGHBORS AFFIDAVIT.

Please read these instructions before filling up your affidavit.

State of New York County of Sullivan SS:  
 In the matter of the claim of Margaret Zimmerman widow of John Zimmerman late a  
private in Company L of the 56 Regiment of N.Y. Inf. Vols.  
Alfred B. Holmes aged 58 years, a resident of town of Thompson N.Y.  
 aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

NEIGHBORS:— Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

whose Post Office address is Monticello Sullivan County N.Y.

who being duly sworn, declare in relation to aforesaid case as follows: I know the claimant & I know her husband for years before his death. in fact I knew them from the time they moved on the place she was living on at time of his death. The farm is small & rough & it made her a home, but it would not support her, if it rented for from \$40. to \$50. a year it would be all it is worth & then the taxes would have to be paid out of that. I have known the place intimately & before she bought it & since her husband's death have worked considerable on the place; it is a small rough farm & is worth from \$700 to \$800 it will not support her it just about rents for what it would cost to rent a house to live in no one legally bound to support her that I know of. I know these facts from personal knowledge of the premises & if any one was legally bound to support her I think I would know it.

State your source of information concerning Claimant.

I have no interest whatever in his claim, and \_\_\_\_\_ am not related to claimant.

Two Witnesses when signed by mark: J. Mapleloran Alfred B. Holmes

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 separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his Jurat.

Sworn to and subscribed before me this 12<sup>th</sup> day of February 1897  
 at Monticello in the County of Sullivan

State of New York I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of full credit as a witness, and that the contents of the above affidavit were made known to him before execution.  
J. Mapleloran  
 Notary Public

STATE OF ..... }  
COUNTY OF ..... } ss.

I HEREBY CERTIFY that ..... before whom the foregoing affidavit was made, was at the execution thereof, a ..... in and for the County of ..... and State of ..... duly authorized to administer oaths, and that his signature hereto is genuine. His Commission was dated ..... 188 ; and will expire ..... 188 .

(Official Signature.)

*Neighbours* TESTIMONY.

IN THE CLAIM OF  
*Margaret Zimmerman*

For *Widows Pension*  
No. ....

AFFIDAVIT OF  
*A B Holmes*  
*Worth of parent*  
*income no one*  
*bound for her support*  
FILED BY

PETER E. PALEN,  
ATTORNEY,  
MONTICELLO, - N. Y.



# NEIGHBORS AFFIDAVIT.

Please read these instructions before filling up your affidavit.

State of New York County of Sullivan SS:  
 In the matter of the claim of Margaret Zimmerman widow of John Zimmerman late a  
private in Company L of the 56 Regiment of N Y V Buff Vols.  
George H Moore aged \_\_\_\_\_ years, a resident of Town of Thompson  
 \_\_\_\_\_ aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

NEIGHBORS:— Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity,  $\frac{1}{8}$ ,  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

whose Post Office address is Monticello Sullivan New York  
 who being duly sworn, declare in relation to aforesaid case as follows:

*I have known the claimant for over fourteen years at which time I moved in the neighbour of her place. it is a small rough farm & will not support her. it made her a home. I should say it is worth from \$400. to \$800. & would not rent for over \$40 to \$50. & then the taxes would have to come out of the rent each year so it would not rent for actual cash after taxes out for over \$30. to \$40. a year; and this price for rent & farm includes some 8 acre owned by George Nimmo & \$30<sup>00</sup> would be fair rent for the original farm per year I have been brought up on a farm & followed it for years*

State your source of information concerning Claimant.

I know these facts from personal acquaintance with the premises  
 I have no interest whatever in his claim, and am not related to claimant.

George H Moore

Two Witnesses when signed by mark: \_\_\_\_\_

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 separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his jurat.

Sworn to and subscribed before me this 22 day of February 1892  
 at Monticello in the County of Sullivan

State of New York I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of full credit as a witness, and that the contents of the above affidavit were made known to him before execution.

Geo J. Smith  
 Notary Public

*Certificate filed*

STATE OF ..... } ss.  
COUNTY OF .....

I HEREBY CERTIFY that ..... before whom the foregoing affidavit was made, was at the execution thereof, a ..... in and for the County of ..... duly authorized to administer oaths, and that his signature and State of ..... 188 ;  
hereto is genuine. His Commission was dated ..... 188 ;  
and will expire .....

(Official Signature.)

Neighbours TESTIMONY.

IN THE CLAIM OF  
Margaret Zimmerman  
widow of  
John Zimmerman late of  
Co 2 56 NY or Inf  
For Widows Pension

No. 434.100 Am

AFFIDAVIT OF  
George H Moore  
of  
Monticello NY

FILED BY

PETER E. PALEN,  
ATTORNEY,  
MONTICELLO, - N. Y.  
MAR 3 1892  
OFFICE

Worth of farm  
& income therefrom

DECLARATION FOR WIDOW'S PENSION.

ACT OF JUNE 27, 1890.

To be Executed Before a Court of Record or some Officer Thereof Having Custody of its Seal.

State of New York, County of Sullivan, ss:

On this 9th day of July, A. D. one thousand eight hundred and ninety

personally appeared before me, Deputy Clerk of the County

court, the same being a court of record within and for the county and State aforesaid, Margaret

Zimmerman, aged 64 years, a resident of the town of Thompson

county of Sullivan, State of New York, who, being duly sworn

according to law, declares that she is the widow of John Zimmerman, who enlisted

under the name of John Zimmerman, at Sullivan Co NY on the 5th

day of October, A. D. 1864, in B Co 56th NY V. Inf

Here state rank, company, and regiment, if in military service, or vessel, if in the Navy.

and served at least ninety days in the late War of the Rebellion, who was honorably discharged October 17th 1865 and died 28 September 1873

The cause of death need not be stated.

That she was married under the name of Margaret Bayer to said

John Zimmerman on the 16 day of August, 1847,

by Rev Carel Lichtenberg, at Germany, there being no legal

barrier to said marriage. neither of the parties had been married

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

before

That she has not remarried since the death of the said John Zimmerman

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

born, 18, born, 18

That she has heretofore applied for pension and the number of her former application is never

Be careful to fill

have applied

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, with full power of substitution and revocation Peter E Palmer

of Monticello, State of New York, her true and lawful attorney

to prosecute her claim; that her post-office address is Monticello

county of Sullivan, State of New York

Attest: Charles S. Horton, Brian D. Jobe

Margaret Zimmerman's signature

Also personally appeared Charles S. Thornton, residing at Monticello N.Y., and Hiram D. Jobe, residing at Monticello N.Y., 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 Margaret Zimmerman, the 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 20 years and 10 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.

Charles S. Thornton  
Hiram D. Jobe  
 Signature of witnesses.

Sworn to and subscribed before me this 9 day of July, 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.

Charles S. Thornton  
 Signature.  
Hiram D. Jobe  
 Official character.

Notary Public  
deputy of clerk  
well

NOTES.

- 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 (executed after the passage of act) in the Pension Bureau.



AGT OF JUNE 27, 1890.  
 WIDOW'S CLAIM.

Claimant Margaret Zimmerman  
 Soldier John Zimmerman  
 Service Co. L. 56 NY Inf

ADDRESS:  
Monticello  
Sullivan Co.  
N.Y.

15896

FILED BY  
Edw. J. Palmer, Atty.  
Monticello N.Y.

Date of execution.....

Printed and sold by W. H. Moore & Co., Box 604, Washington, D. C.