

These Blanks to be filled in by Pension Board

Claim No. ....

Name .....

Property .....

Co. Com. ....

Res. ....

PROOF OF WAR SERVICE

Witnesses .....

Company .....

Regiment .....

Enlisted .....

W. D. RECORD

Company .....

Regiment .....

Enlisted .....

REMARKS

Former Claim No. ....

Application No. ....

Pensioner No. ....

CLAIM FOR PENSION

BY *Mrs. Lucy C. Milton*

OF *Safety Harbor* Postoffice

*Quincy* County

WIDOW OF *T. M. Milton*

OF

Company  
Regiment

FILED IN PENSION DEPARTMENT

*Dec. 10*, 1930

APPROVED AND FILED IN COMP-  
TROLLER'S OFFICE

*Dec. 23*, 1930

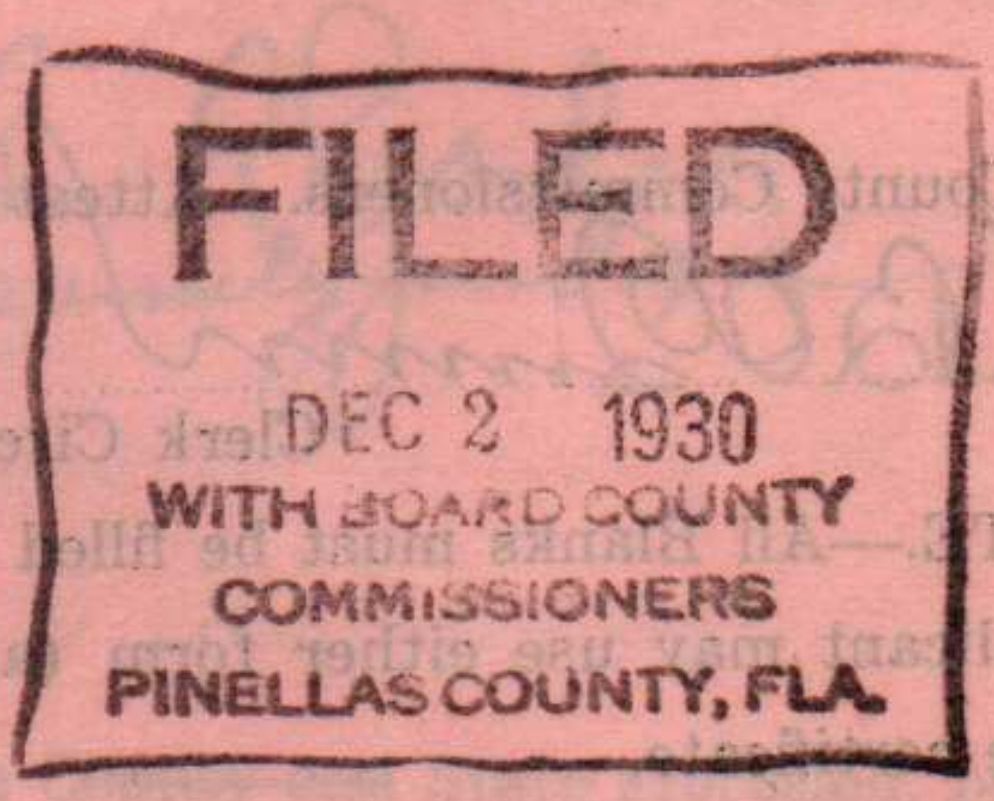
With pay from *Oct. 29<sup>th</sup>*, 1930

At the rate of \$ *48.00* per annum

*Ramelle Bowen*  
Secretary of Board.

Ptg. Dept. - Fla. Ind. School for Boys, Marianna

*82 62*



APPLICANT MUST GIVE PERMANENT ADDRESS  
Applicant may attach certified copy of official record of husband's death in lieu of form (c) if preferred.  
Where the applicant for pension has remarried since the death of the soldier husband, upon whose service she is applying for a pension, she must establish the fact that she has again become a widow in the same man-  
ner as prescribed in above paragraph or be divorced, she should forward certified copy of decree granting a  
divorce annulling such marriage.  
NOT - All claims must be filed out. All information required must be fully and accurately given.  
By the County Clerk  
COUNTY COMMISSIONERS  
PINELLAS COUNTY, FLA  
DEC 2 1930  
WITH BOARD COUNTY COMMISSIONERS  
FILED