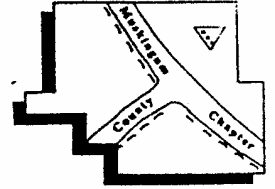




Civil War Families of Muskingum County



Application

INSTRUCTIONS:

Fill in blocks a, b, c, f on this page. Type or hand print in black ink all information. A check for \$10.00 must accompany the application. Proceed to page 2.

a Applicant's Name	Street Address	County
Full Name of Husband or Wife	Town	State
		Zip Code

b NAME OF VETERAN(S) WHO SERVED MUSKINGUM COUNTY	UNIT	YEAR	UNION/ CONFEDERATE

c
MCGS USE ONLY
Proved Veterans:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____

c
MCGS
Dues Paid For
Year _____

C.W.M.C.

d
MCGS
Verification

f
FILLED IN BY APPLICANT
Name _____

g
MCGS USE ONLY

Civil War
MCGS Number _____

Full / Associate
Membership _____

Date Application
Received _____

Acceptance Date _____

Fee Received _____

APPROVED BY:

Civil War MCGS Chairperson _____ Date _____

MCGS Trustee Chairperson _____ Date _____

MCGS President _____ Date _____

1. I _____ Was born on _____
At _____
City County State

2. I am the child of _____
Born on _____ at _____
City County State
Died on _____ at _____
City County State

_____ His wife
Born on _____ at _____
City County State
Died on _____ at _____
City County State
Married _____ at _____
City County State

3. The Said _____ Was the _____
of _____ *Son or Daughter*
Born on _____ at _____
City County State
Died on _____ at _____
City County State

_____ His Wife
Born on _____ at _____
City County State
Died on _____ at _____
City County State
Married on _____ at _____
City County State

4. The Said _____ Was the _____
of _____ *Son or Daughter*
Born on _____ at _____
City County State
Died on _____ at _____
City County State

_____ His Wife
Born on _____ at _____
City County State
Died on _____ at _____
City County State
Married on _____ at _____
City County State

5. The Said _____ Was the _____
of _____ *Son or Daughter*
Born on _____ at _____
City County State
Died on _____ at _____
City County State

_____ His Wife
Born on _____ at _____
City County State
Died on _____ at _____
City County State
Married on _____ at _____
City County State

Give volume and page for book reference and include a copy machine, photo, or other facsimile copy of the pertinent pages, and of all published or unpublished records used for proof. Typed hand printed, or written copies of documents, not certified as "True Copies", are not acceptable as proof. Published or manuscript material authored by the applicant or his family will not of themselves be accepted as proof.

A blank sheet may be attached for additional proper citations

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

I, _____ do hereby swear that the statements set forth in this application are true to the best of my knowledge and belief.

Signature of Applicant _____ Date _____

This application and information contained becomes the property of the Muskingum County Chapter Ohio Genealogical Society.