GENERAL INSTRUCTIONS

PLEASE READ ALL DATA BEFORE FILLING OUT THE APPLICATION FORMS.

- 1. Print or type all information.
- 2. Use black ink (not felt tip) or typewriter ribbon.
- 3. Names
 - a. Use full names for men, no initials.
 - b. Use full maiden name for women. If listing a marriage for a woman which was not her first marriage, use maiden name in parentheses followed by her previous married name, such as Jane (Smith) Doe; Jane Smith being her birth name.
 - c. A nickname (if needed to agree with the name shown on a proof) may be written in "Quotes", e.g. Harriet "Hattie" Martha Jenkins.
 - d. Do not add titles or rank to names (e.g. Dr., Capt., Rev., Sr. Jr.)
 - e. Jr., III, etc. must be used as part of the name if shown on the birth certificate.
- 4. Dates are to be written by day, month and year (e.g. 1 Jan 1900). Use three letter abbreviations for the month without the period (e.g. Feb, Sep)
- 5. Places
 - a. List town, city or township, county or parish and state divided by slashes without periods or commas. Use two letter postal State abbreviations. For Example: Ashtabula/Ashtabula/OH or Ashtabula//OH without the county or /Ashtabula/OH without the city or township
- 6. Lineage: Do not complete the lineage beyond the earliest ancestor in Ashtabula County.
- 7. All proofs become the property of the Ashtabula County General Society. PLEASE SEND NO ORIGINAL COPIES OF PROOFS USE CLEAR AND READABLE PHOTOCOPIES ONLY NO PROOFS WILL BE RETURNED.
- 8. It is suggested that while you are working with proof material, you make arrangements for these papers to eventually be donated to a library, genealogical or historic society for preservation.
- 9. Computer generated Family Group Sheets may be substituted for Form: C
- 10. Proofs of the bloodline parent to child relationship for each generation and the date of residency in Ashtabula County MUST be selected from Primary Sources if they exist; otherwise, they shall consist of two or more independently created Secondary Sources.
- 11. Full Birth or baptismal records showing the names of the parents should be submitted whenever possible. Where birth or baptismal certificates are not available to prove a child/parent relationship, a combination of the following may be submitted:
 - a. Marriage records showing the names of the parents of the spouses.
 - b. Death records showing the names of the parents of the deceased.
 - c. Will, probate records, etc. mentioning the children of the descendants by full names.

- d. Land records, court records, etc., in which the relationship of parents and child is explicitly mentioned.
- e. Photocopy of the actual 1880-1930 federal census records.
- f. Photographs of tombstones are acceptable for proof of birth and death dates and for relationships actually stated on the stone.
- 12. Circumstantial Evidence Sources are not considered proof unless backed up by Primary or Secondary Sources.

Instructions for Application Forms

APPLICATION FORM, LINEAGE CHART(S), FAMILY GROUP SHEETS, ANCESTOR CERTIFICATE CLASSIFICATION FORM AND THE BIOGRAPHICAL SKETCH FORM

1. APPLICATION OR SUPPLEMENTAL APPLICATION FORM (Form A or A-1):

- a. Fill in your name, address, telephone number and e-mail address, if applicable.
- b. Fill in your Direct Line to your earliest Ashtabula County Ancestor starting with yourself as #1.

One of your parents is # 2 depending upon which line you choose to follow.

One of your grandparents (only one parent of #2) is #3 <u>depending upon which line you choose to</u> follow.

Continue your direct line to your earliest Ashtabula County ancestor.

c. Sign and date your application. (Do not complete the lower part of the application until classification is determined.)

2. LINEAGE CHARTS (Form B):

- a. Follow the numbers on your APPLICATION FORM. The numbers must match.
- b. The LINEAGE CHART further detail vital statistics of the ancestors on your APPLICATION.
- c. The number of the spouse, 1st, 2nd, etc. should go in the blank space in the lines, "and my (___) spouse or in "and his/her (___) spouse.
- c. Cite your PROOF for each ancestor. (See examples of Primary and Secondary sources.)
- d. Number your proof to match the number of the ancestor on the upper right hand corner of the document. (Example: "Proof # 1") If a proof is cited as a source in two or more different generations, submit only one copy and number the proof with both generations, (e.g. Proof # 1 & Proof #2)
- e. Underline with a red pencil all of the relevant information on each proof that was included on the application.
- f. You may not be able to fill in all of the items, but enough must be completed to establish your DIRECT LINE to your Earliest Ashtabula County Ancestor and the RESIDENCY DATE of your Ashtabula County Ancestor.
- g. Make a copy of your APPLICATION, LINEAGE CHARTS AND PROOFS.
- 3. **FAMILY GROUP SHEETS (Form C):** Form may be copied. Computer generated Family Group Sheets may be substituted for Form C. WE ENCOURAGE THE USE OF FAMILY GROUP SHEETS TO DOCUMENT THE COMPLETE FAMILY UNIT. THIS IS NOT A REQUIREMENT OF THE

CERTIFICATION PROGRAM, BUT WOULD BE A VALUABLE CONTRIBUTION TO FUTURE GENERATIONS.

- 4. ANCESTOR CERTIFICATE CLASSIFICATION (Form D):
 - a. List Name of Ancestor to be honored.
 - b. List date proven Ancestor Settled in Ashtabula County.
 - c. List PROOF of the date proven Ancestor Settled in Ashtabula County.
 - d. List Location of Settlement in Ashtabula County.
 - e. Referring to the list of Ancestor Certificate Classifications at the top of the page, select and list the Certificate Classification based upon the proven date of Settlement in Ashtabula County.
 - f. List the Name of the person(s) to whom the Certificate(s) is/are to be issued. Attach an additional sheet if more certificates are needed.
 - g. When the number of CERTIFICATES wanted is determined, fill in the payment information on the APPLICATION FORM (Form A).
- 5. **BIOGRAPHICAL SKETCH (Form E)**: Form may be copied. WE ENCOURAGE THE USE OF THE BIOGRAPHICAL SKETCH TO PROVIDE ADDITIONAL DOCUMENTATION OF THE ANCESTOR. THIS IS NOT A REQUIREMENT OF THE CERTIFICATION PROGRAM, BUT WOULD BE A VALUABLE CONTRIBUTION TO FUTURE GENERATIONS.

6. SUBMITTING THE APPLICATION AND PROOFS:

- a. After completing all of the Forms and annotating the proofs, make a photocopy of each sheet of the application and proofs for your records so you will be able to answer questions if clarification is required.
- b. Do not use staples, glue, tape, thread, pins or other means to attach the APPLICATION FORMS together or the PROOFS together or to the Applications.
- c. Do not fold the APPLICATION FORMS or the PROOFS.
- d. Use vinyl coated paper clips to attach the APPLICATION FORMS together and the proofs for each generation together.
- e. Place the Application Form (Form A or A-1), Lineage Charts (Form B), Documented Proofs, Family Group Charts (Form C), the Certificate Classification (Form D) and Biographical Sketches (Form E) together with your check or money order made out to the Ashtabula County Genealogical Society in an envelope without folding and deliver or mail to:

ASHTABULA COUNTY GENEALOGICAL SOCIETY, Inc. OGS # 83
Geneva Public Library
860 Sherman Street
Geneva, Ohio 44041-9109

Application Form

Use Form A-1 on reverse for Supplemental Applications

	name) (middle name) (last name)	
Address		County
	(street & number)	
City/State		Zip Code
Phone Number	er ()e-mail ad	ldress
Direct Line	e from Applicant to earliest Ashtabula	County Ancestor
No. 1 You	rself	
No. 2 You	Parent	
No. 3 You	Grandparent	
No. 4 You	Great Grandparent	
No. 5 You	Great ² Grandparent	
No. 6 You	Great ³ Grandparent	
No. 7 You	Great ⁴ Grandparent	
No. 8 You	r Great ⁵ Grandparent	
Pl	LEASE SIGN AND DATE YOUR APPLICATION HE	ERE BEFORE MAILING
Signature	e of Applicant	Date:
	Ancestor Certificate Applicati	on Fees
Approved, a	stor Certificate Application, and when an Ancestor Certificate in any tion for an Individual	1 @ \$10.00 = 10.00
	Ancestor Certificates of Same or Classification for the same Individual	@ \$5.00 =00
	Certificates for Family Members of the idual as delineated on Form(s) D	@ \$3.00 =00
		TOTAL ENCLOSED:00

Supplemental Application Form

(first name) (middle name) (last name) Address	County
(street & number)	
City/State	Zip Code
Phone Number () e-mail	address
Direct Line from Applicant to earliest Ash	ntabula County Ancestor
No. 1 Yourself	
No. 2 Your Parent	
No. 3 Your Grandparent	
No. 4 Your Great Grandparent	
No. 5 Your Great ² Grandparent	
No. 6 Your Great Grandparent	
No. 7 Your Great Grandparent	
No. 8 Your Great Grandparent	
PLEASE SIGN AND DATE YOUR APPLICATION Signature of Applicant	
Ancestor Certificate Ag	pplication Fees
Ancestor Certificate(s) of Same or Differe Classification for an Individual Who Has Received his First Ancestor certificate	@ \$5.00 = \$00
Additional certificates for Family Members Same Individual as delineated on Form(s) I	
	TOTAL ENCLOSED: \$00

Lineage Chart

Please Note: Numbers must match listings on the Application Form A

	_	DATE	CITY OR TWP/COUNTY/STATE
1. I am			
and my () spouse			
<u></u> ,			
D			
Proofs #1:			
2. I am the Child o	 f		
and his/her () sp			
- 5 HO			
Proofs #2:			
3. I am the Grandch	ild of		
	born _		
	died _		
and his/her () sp	ouse		
	born _		
Proofs #3:			
4. Great Grandchild	of		
and his/her () an			
and hip/her (/ sp			
			-,
Proofs #4:			

Lineage Chart

	DATE	CITY OR TWP/COUNTY/STATE
5. Great ² Grandchild of		
and his/her () spouse		
		·
Proofs:		
6. Great ³ Grandchild of		
and his/her () spouse		
Proofs:		
7. Great Grandchild of		
and his/her () spouse		
Proofs:		
8. Great grandchild of		
Proofs:		

Family Group Sheet

Ancestor's Full Name	·		
Birth Date	Place		
Marriage Date	Place		
Death Date	Place		
Burial	Cause of Death		
Residence	Occupation		
Church Affiliation	Military Service		
	_ Place		
	_ Place		
Father's Full Name	Mother's Maiden Name		
Children: (Date) (Place) 1. Name	(Date) (Place) 5. Name		
Birth			
Christened			
Spouse			
Marriage	Marriage		
Death			
Burial	Burial		
2 Name	6. Name		
Birth			
Christened			
Spouse			
Marriage	Marriage		
Death	Death		
Burial	Burial		
3. Name			
Birth			
Christened			
Spouse	Spouse		
Marriage			
Death			
Burial	Burial		
4. Name	8. Name		
Birth			
Christened	Christened		
Spouse			
Marriage			
Death			
Burial	Burial		

Add	itional Children:		
	(Date) (PLACE)		(Date) (Place)
9.	Name	_ 13.	
	Birth		Birth
	Christened		Christened
	Spouse	_	Spouse
	Marriage	_	Marriage
	Death		Death
	Burial	-	Burial
10.	Name	14.	Name
	Birth		Birth
	Christened		Christened
	Spouse		Spouse
	Marriage		Marriage
	Death	_	Death
	Burial	_	Burial
		_	
11.	Name		
	Birth	_	Birth
	Christened	_	Christened
	Spouse		Spouse
	Marriage		Marriage
	Death	_	Death
	Burial	_	Burial
12.	Name		
	Birth	_	Birth
	Christened		Christened
	Spouse		Spouse
	Marriage	_	Marriage
	Death	_	Death
	Burial	_	Burial
	itional Information: (Other Marria		
Sou	rces of Information:		
Nam	e of Compiler		
	ress		
Cit	y, State		
Dat	e Submitted		

Ancestor Certificate Classifications

Pioneer Ancestor Certificate * of Ashtabula County, Ohio (Ancestors settled on before 31 Dec 1824)

Early Ancestor Certificate * of Ashtabula county, Ohio (Ancestors settled between 1 Jan 1825 and 31 Dec 1860 inclusive)

Centennial Ancestor Certificate * of Ashtabula County, Ohio (Ancestors settled between 1 Jan 1861 and 31 Dec 1900 inclusive)

Heritage Ancestor Certificate * of Ashtabula County, Ohio (Ancestors settled between 1 Jan 1901 and 31 Dec 1930 inclusive)

Contemporary Ancestor Certificate * of Ashtabula County, Ohio (Ancestors settled between 1 Jan 1931 and 31 Dec 1970 inclusive)

Note: It is very important to spell all names correctly. Your CERTIFICATE will be issued as it appears on this page.

Ancestor Name:
Date Proven Ancestor Settled in Ashtabula County:
Proof for above Date
Location of Settlement:
Certificate Classification:
Certificate Issued To:
ADDITIONAL CERTIFICATES (Same Ancestor)
Certificate Issued To:
Certificate Issued To:
Certificate Issued To:
~ FOR ACGS USE ONLY ~
The undersigned have investigated and approved this application:
Lineage Committee 20
Lineage Committee 20
Ancestor certificate Number(s): Fee Paid:

OPTIONAL BUT RECOMMENDED

BIOGRAPHICAL SKETCH

Ancestor's Name	

