



Civil War Families of Gallia County, OGS, Est. 2004
P.O. Box 1007, Gallipolis, OH 45631-1007



Application

Instructions to applicant: Fill in Blocks A through D on this page. Document your ancestral and/or collateral lines on the forms provided. Type or handprint all information in black ink. A check for \$15.00 must accompany this application. Return to Gallia County Genealogical Society, OGS Chapter, Inc., P.O. Box 1007, Gallipolis, OH 45631-1007.

A Applicant's Name (and maiden name if applicable)	Street Address	County	
Full Name of Husband or Wife	City	State	Zip + 4

Civil War Ancestors or Collateral Relatives

B NAME OF SOLDIER	DATES SERVED IN THE CIVIL WAR	COUNTY OF RESIDENCE IN OHIO IF APPLICABLE	MILITARY UNIT
Example: Lafayette Washington	6 May 1863 – 7 July 1865	Gallia	1 st WV Cavalry
Example: Alexander Smithfield	9 Dec 1864 – 1 Mar 1865	Gallia	Squirrel Hunter
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

C My Gallia County Genealogical Society, OGS, Inc. dues are paid for the Year _____	D Applicants E-Mail Address
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Gallia County Genealogical Society, OGS Chapter, Inc. USE ONLY

Proved Ancestors/Relatives:

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

Local Society Verification _____
 Civil War Families Gallia OGS Number _____
 Date Application Received _____
 Acceptance Date _____
 Fee Received _____
 Notes: _____

Approved By:

Civil War Families of Gallia Co., OGS, Est. 2004
 Chair: _____
 Date: _____

Civil War Families of Gallia County, OGS, Est. 2004
SPECIFICATIONS AND RULES OF EVIDENCE

Specifications

Any member of the Gallia County Genealogical Society, OGS Chapter, Inc., who is a direct descendent, or a collateral descendent, of any person who served in the Civil War, for the Union or the Confederacy, is eligible to become a member of the Civil War Families of Gallia County, OGS, Est. 2004. The person must have lived in or served in Gallia County at some time. Service does not have to have occurred in Ohio. "Squirrel Hunter" and "Spies", male or female, are also eligible.

You must submit an application and the documents that prove the relationship. There must be documentation for each generation, including yours, your parents, grandparents, etc. The application fee of \$15.00 is due when the application is submitted. Approval will come from the Civil War Families of Gallia County, OGS, Est. 2004 committee.

Rules of Evidence

PLEASE TAKE THE TIME TO READ, AND BECOME FAMILIAR WITH, THESE RULES.
FOLLOW THEM CAREFULLY WHEN YOU PREPARE YOUR PAPERS.

The rules of evidence applying to membership follow and are standards by which all CWFGC, OGS documentation will be judged. There are no exceptions.

The dates of service must be between 12 April 1861 (the bombardment of Fort Sumter) and 18 April 1865 (when Joseph E. Johnston (C.S.A.) surrendered to General William T. Sherman at Durham Station, NC).

The nature and extent of the evidence submitted as documentation shall be sufficient to show that the applicant is a direct descendant or collateral relative of the person or persons who performed for the Union or the Confederacy. Documentation must be sufficient to differentiate between any two persons of the same name.

Each document submitted, whether primary or secondary evidence, must include a full citation with volume and page number, e.g., Marriage Records, Gallia County, Ohio, Volume 10, pg. 137. Copies of vital records are acceptable, if the seal is visible on the copy (see #13).

If there is no vital record, we require two secondary proofs that support the same event or date, such as a newspaper clipping, county history or family record (see #3).

1. Proof of Military Service can be found in enlistment, discharge, pension or other federal, confederate, or state government documents.

2. Primary or collateral evidence from vital statistics, courthouse or other government records, such as discharge or pension papers, usually is considered excellent documentation. Other primary evidence might include Bible records (which must be contemporary with the publication date of the Bible or events), or diaries/letters written by the serviceman or woman.

3. Secondary evidence such as census records, newspaper clippings (must give the name of the paper, location, page and date of publication) might be used as corroborative evidence. County histories and family records contemporary to the facts reported are considered as supporting evidence only.

4. Circumstantial evidence WILL NOT be accepted as documentation unless supported by primary or secondary evidence.

5. Oral, written or published family traditions may be in error and CANNOT be accepted as documentation.

6. Printed or manuscript genealogies, genealogical records or compilations, family group sheets and charts, family reunion records and similar material are not considered documentation.

7. Lineage papers from other patriotic or hereditary societies will not be considered as documentation.

8. Documents must either alone or with other acceptable materials, actually STATE THE FACT TO BE DOCUMENTED. Unnamed individuals specified in court records as "heirs" or "heirs-at-law", unless it is known that applicable laws at the time included only collateral line descendants, cannot be assumed to be the person in question.

9. Documents written or presented in a foreign language must be accompanied by an English translation and the translation certified as a "true translation" by the translator (not the applicant or a family member).

10. Old letters, diaries or family records can be accepted as documentation only for the facts that the writer could logically know FIRST HAND. Identification of the writer and the date is necessary.

11. Female ancestors named on the application must be identified by their maiden names and, if married, their marriages proved.

12. A collateral line relationship must be documented at each step, parent to child, or sibling to sibling. You must prove siblings are children of the same parents. Half-siblings will be considered if you and the candidate are descended from a common ancestor/ancestress.

13. All documents must include a full citation and the volume and page number must be written on the copy itself! Bible records must include a photocopy of the title page, with publication date and the current owner's name.

14. Married female applicants, who use their husband's surname, must include a copy of their marriage record to document their change of name. Each legal name change must be documented.

15. Photographs of tombstones might be acceptable for birth and death dates and for relationships stated on the stone, if legible. We require a transcription of the stone also as sometimes the dates in a photo are difficult to read. The stone must be contemporary style in line with the death date. Cemetery burial records or funeral home records are acceptable.

16. Typed, handwritten or printed copies of original documents must be certified as a "TRUE COPY" by a courthouse or other official, newspaper employee, cemetery employee, etc. An applicant or member of his/her family cannot certify a document as a "TRUE COPY". Photocopies of original documents are acceptable if there are no changes on the original.

17. REMINDER: A statement is not necessarily true just because it is in print!

Civil War Families of Gallia County, OGS, Est. 2004
Descent Chart for **COLLATERAL** Line

You must include a supporting document for each statement below. This might be a birth certificate, marriage certificate, or death certificate. When these are not to be found at the official level, other evidence, such as Bible records, census, letters, etc. may be used. List these documents and their document number on the "Documentation" page. If you have more than one document for an event, please number them #1, #1a, #1b, etc. Put your name and address on the back of each page of every document you send. Please do not use staples! If you check your papers and sort them carefully, number them correctly and submit them in the proper order, staples or paper clips will not be necessary.

I, _____, am number _____ below. When you have reached yourself on the chart, please put that generation number in the space provided above.

No. 1 below is my collateral line Civil War relative. The proof of service is contained in the attached documents. Please check the appropriate space/s below and be sure your name and address are on each document and list them on page 4.

Discharge: _____ Pension: _____ Muster Roll: _____ Other: (explain) _____

No. 2 below is my ancestor/ancestress and the sibling of No. 1.

I, _____ am the (relationship) _____ of

1. (Civil War Relative) _____

who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

and married _____

who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

they were married _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

The said _____ was the brother _____ sister _____ (please check one)

2. of: _____ (Doc #) _____

who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

and married _____

who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

they were married _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

continue please

3. The said _____ and _____ were the parents of _____ (Doc #) _____
who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and married _____

who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
they were married _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

4. The said _____ and _____ were the parents of _____ (Doc #) _____
who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and married _____

who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
they were married _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

5. The said _____ and _____ were the parents of _____ (Doc #) _____
who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and married _____

who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
they were married _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

6. The said _____ and _____ were the parents of _____ (Doc #) _____
who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and married _____

who was born on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
and died on _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____
they were married _____ at (City) _____ (County) _____ (State) _____ (Doc #) _____

Doc # _____ Description of document: _____

Doc # _____ Description of document: _____

Doc # _____ Description of document: _____

Doc # _____ Description of document: _____

Doc # _____ Description of document: _____

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If you have more proofs of relationships, please use another page and title it 'DOCUMENTATION' No. 2. Number your document copies accordingly.

MILITARY SERVICE DOCUMENTATION

Please list below documentation of Civil War service in Gallia County or residency in Gallia County at any time during the person's life and Civil War service in any military unit, for the individual through whom eligibility is claimed.

Description of document: _____

Description of document: _____

Description of document: _____

Description of document: _____

Description of document: _____

Description of document: _____

Description of document: _____

Description of document: _____

Description of document: _____

Description of document: _____

I, _____ do hereby swear that the statements set forth in this application are true to the best of my knowledge and belief. I understand that this application, information and all supporting documents and data become the property of The Gallia County Genealogical Society, OGS Chapter, Inc. upon submission.

Signature of Applicant _____ Date _____