

DECEASED MILITARY VETERAN FAMILIES OF HURON COUNTY, OHIO
Huron County Chapter of the Ohio Genealogical Society

RULES

The objective of Deceased Military Veteran Families of Huron County, Ohio (DMVF-HCO), is to identify and honor persons who served in the military and who lived in Huron County, Ohio, at some point in their lives. The person may have been male or female. It is not necessary that the service was during an active period of war. Those who served in a federal unit, had state service, or were members of the county militia are eligible. Even service in another country, friend or foe, is honored as long as the veteran lived in Huron County.

The applicant must be a current member of the Huron County Chapter of the Ohio Genealogical Society and must be a direct descendant, or a collateral relative, or the person who served in the military. "Collateral" is restricted to a brother or sister of the applicant's direct ancestor in this application. An uncle married to a sister does not count.

The member must submit a signed application and copies of the documents that will prove the relationship. There must be proof of a link between each generation, including yours, your parents, grandparents, etc. We are especially seeking documentation on the veteran, and applicants are encouraged to submit photographs in uniform, letters written during service, discharge papers, enlistment records, etc. We hope to create a library archive on these veterans.

An application fee of \$10.00 must accompany the paperwork. In this first application, the applicant may submit an unlimited number of veterans. Supplementary applications on ancestors added at a later date will be \$5.00 per veteran. This will be returned if no single ancestor in the application is approved. All applications are reviewed by the Deceased Military Veteran Families of Huron County Committee with verification by the President of the Chapter. Each application will be judged on its own merits. No documentation will be returned to the applicant, even if not accepted, so please do not include original materials -- photocopies only.

The deadline for submission of applications is December 31 each year. A certificate and pin will be awarded to each applicant at the April awards banquet. Those who cannot attend will receive theirs by mail after the ceremony. Other immediate family members of the applicant (grandparents, parents, siblings, children, grandchildren) may receive an additional certificate and pin on payment of \$5.00 plus proof of relationship. Membership in the Chapter is not required in these cases.

1. Each document must include a full citation -- title, volume and page number, location, date, or court of record. This includes newspaper clippings and photographs.
2. Proof of service should include one or more of the following items: military roster or muster roll, pension record, discharge copy, veteran records, soldiers tombstone, or contemporary letters or newspapers indicating service.
3. Documents contemporary to the life of the individual may be used as proof -- births, deaths, marriages, Bible records, deeds, census, tax lists, obituaries, letters, etc.

4. Secondary materials may be used to support other evidence only -- county histories or biographies, family histories, oral history, reunion lists, lineage society papers. No secondary reference will be accepted by itself. Remember, the author of that material had to get it from somewhere!

5. Documents should actually state the fact to be proven. For example, the 1850 U. S. Census does not say "son" or "daughter" although families are grouped together; the 1880 Census is the first to actually state the relationship of persons listed. And, the word "heirs" in an estate case must be defined by some additional documentation, because the word could mean child, grandchild, sibling, or even a family friend or church trustee, if a legatee in that estate.

6. Documents in a foreign language must be accompanied by a translation into English.

7. Female applicants using their husband's surname should include a copy of their marriage record to prove that name change. If there are multiple marriages, it may be necessary to document each to prove the change of name.

8. If the copy of an original document submitted is typed or handwritten, the item should be certified by a librarian or court official, who can compare it to the original.

9. An ancestor chart should accompany the application to clearly show how that veteran is related to the applicant. A family group sheet outlining the spouse and children of each veteran is also requested, if possible; if not married, do one for their parent. Documentation does not need to be submitted for each person on these charts. Only the line of direct descent and connection to the collateral ancestor (if necessary) should be proven.

BY ALL MEANS, INCLUDE ANY VETERAN PHOTOGRAPHS, LETTERS, NEWSPAPER ARTICLES, ETC., IF THEY PERTAIN TO HURON COUNTY.

APPLICATION FOR
DECEASED MILITARY VETERAN FAMILIES OF HURON COUNTY, OHIO

Fill out completely. The documents for proof of service and for each generation should be listed next to the corresponding number. Please type or print clearly. The \$10.00 application fee (\$5.00 supplement) must accompany the application, along with any additional family member fees of \$5.00 each. Mail to: Huron County Chapter, OGS, P. O. Box 923, Norwalk, Ohio 44857-0923.

Applicant's Name (as it will be listed on the certificate)

Street: _____

City, State, Zip Code: _____

Phone Number and Email: _____

Names for Additional Certificates

<u>Person(s) Who Served in the Military</u>	<u>Unit</u>	<u>Township of Residence</u>
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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Signature of Applicant _____

Date Application Submitted _____

Applicant agrees by signing that all material becomes the property of the Huron County Chapter of the Ohio Genealogical Society and that said material will be made available to the public in the Chapter library collection. In addition, applicant agrees by signing that information provided on the veteran, including, but not limited to, the service data, family group sheet, photograph, pension file, and war letters, may at any time be published by the Huron County Chapter of OGS.

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Approved by:

Date:

CWFHC Chair Signature _____

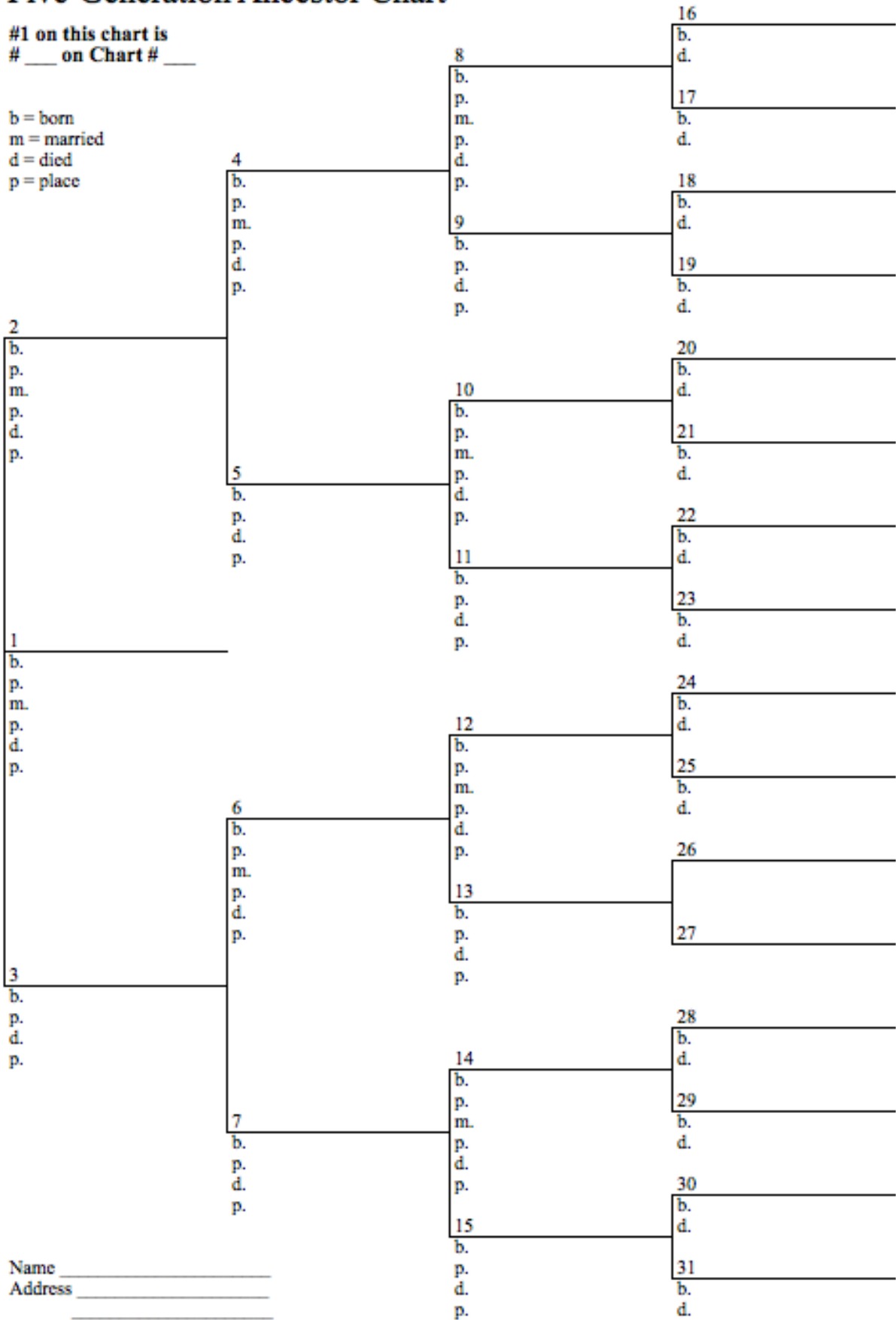
President Signature _____

Five-Generation Ancestor Chart

Chart # _____

#1 on this chart is
___ on Chart # ___

b = born
m = married
d = died
p = place



Name _____
Address _____

Family Group Sheet

Husband				Religion	
	Date (Day/Month/Year)	City/Village	County	State	Country
Birth/Baptism					
Married					
Death					
Buried					
Cemetery				Cause of death	
Occupation(s)				Other spouses	
Father					
Mother					

Wife				Religion	
Birth/Baptism					
Died					
Buried					
Cemetery				Cause of death	
Occupation(s)				Other spouses	
Father					
Mother					

Children						
	Sex	Name	Birth/Place	Married/Place	Died/Place	Spouse(s)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

LINEAGE AND DOCUMENTATION
DECEASED MILITARY VETERAN FAMILIES OF HURON COUNTY, OHIO

1 Applicant: _____

Date of Birth:	Place:
Date of Marriage:	Place:
Name of Spouse:	

2 Parent: _____

Date of Birth:	Place:
Date of Death:	Place:
Date of Marriage:	Place:
Name of Spouse:	

3 Grandparent: _____

Date of Birth:	Place:
Date of Death:	Place:
Date of Marriage:	Place:
Name of Spouse:	

4 Great Grandparent: _____

Date of Birth:	Place:
Date of Death:	Place:
Date of Marriage:	Place:
Name of Spouse:	

5 Great Great Grandparent: _____

Date of Birth:	Place:
Date of Death:	Place:
Date of Marriage:	Place:
Name of Spouse:	

6 Great Great Great Grandparent: _____

Date of Birth:	Place:
Date of Death:	Place:
Date of Marriage:	Place:
Name of Spouse:	

7 Sibling of Number ____ above: _____
(if the soldier is a sibling of your direct ancestor)

Date of Birth:	Place:
Date of Death:	Place:
Date of Marriage:	Place:
Name of Spouse:	

REFERENCES

Service for Soldier:

Service for Additional Soldier:

Generation #1:

Generation #2:

Generation #3:

Generation #4:

Generation #5:

Generation #6:

Sibling #7:

Additional Certificates:

Additional Certificates:

Additional Certificates:

Additional Certificates:

Additional Certificates:

Additional Certificates:

If not enough room, please number your documents,
and put the number in the appropriate slot above.