



LORAIN COUNTY CHAPTER
of
THE OHIO GENEALOGICAL SOCIETY
P O BOX 865 ELYRIA, OH 44036-0865

APPLICATION SETTLERS OF LORAIN COUNTY
Application Deadline is June 1 of any given year

Instructions to Applicant: Fill in A, B, C, and D on this page. List your main ancestral line on pages 2 and 3, beginning with yourself as #1. Type or hand print all information. A check for \$25.00 must accompany the application. If this is a supplementary application, a check for \$10.00 must accompany the application. Any new or supplementary applicant must be a current member of the Lorain County Chapter. The application fee is non-refundable. All applications with appropriate fees should be returned to the Lorain County Chapter, P.O. Box 865, Elyria, OH 44036-0865.

A Name of Applicant _____	Street Address _____	Phone _____	
Full Name of Husband or Wife _____	Town _____	State _____	Zip _____

B My Lorain County Chapter Dues Are Paid for the Year _____	C Applicant's Email Address _____
--	---

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

Signature of Applicant _____ Date _____

This application, information, and all supporting documents and data become the property of the LCC-OGS CD's are not permissible as primary application. They will be allowed as a back up to original paper files.

I agree to allow any or all documentations in this application to be copied for genealogical purposes: YES NO

CHAPTER USE ONLY

Settlers of Lorain County Number _____	Date Application Received _____	Acceptance Date _____	Fee Received - Dues Paid _____
--	------------------------------------	--------------------------	-----------------------------------

MY SETTLERS of LORAIN COUNTY between 1 Jan 1851 and 31 Dec 1880

Name of Ancestor	SLC# if Previously Proven	Year First Proved in Lorain County	Township	Document # Proving Residency in Lorain Co	Accepted (LCC-OGS Use Only)
------------------	---------------------------	------------------------------------	----------	---	-----------------------------

Please use additional sheet of paper if more than 6 ancestors are being proved.

1.					
2.					
3.					
4.					
5.					
6.					

Name to appear on certificate as: _____

APPROVED BY:
Lineage Groups of Lorain County Chairman _____ Date _____
Lorain County Chapter President _____ Date _____

SETTLERS OF LORAIN COUNTY ASCENT CHART

Be certain to include at least one supporting document for each statement below. List each document with its corresponding number on the "Documentation for Ascent Chart" page. Please put your name, address and a citation on the front of each document you submit. 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.

1. I _____
First Middle Maiden Name Surname
 was born on _____ at _____
City County State Document Number _____

2. I am the child of _____
 Document Number _____
 Born on _____ at _____
City County State Document Number _____
 Died on _____ at _____
City County State Document Number _____
 _____ their spouse
 Born on _____ at _____
City County State Document Number _____
 Died on _____ at _____
City County State Document Number _____
 Married on _____ at _____
City County State Document Number _____

3. The said _____ was the _____
Son or Daughter Document Number _____
 Of _____
 Born on _____ at _____
City County State Document Number _____
 Died on _____ at _____
City County State Document Number _____
 _____ their spouse
 Born on _____ at _____
City County State Document Number _____
 Died on _____ at _____
City County State Document Number _____
 Married on _____ at _____
City County State Document Number _____

4. The said _____ was the _____
Son or Daughter Document Number _____
 Of _____
 Born on _____ at _____
City County State Document Number _____
 Died on _____ at _____
City County State Document Number _____
 _____ their spouse
 Born on _____ at _____
City County State Document Number _____
 Died on _____ at _____
City County State Document Number _____
 Married on _____ at _____
City County State Document Number _____

5. The said _____ was the _____
Son or Daughter Document Number _____
 Of _____
 Born on _____ at _____
City County State Document Number _____
 Died on _____ at _____
City County State Document Number _____
 _____ their spouse
 Born on _____ at _____
City County State Document Number _____

Died on _____ at _____
City County State Document Number
Married on _____ at _____
City County State Document Number

6. The said _____ was the _____
Son or Daughter Document Number
Of _____
Born on _____ at _____
City County State Document Number
Died on _____ at _____
City County State Document Number
_____ their spouse
Born on _____ at _____
City County State Document Number
Died on _____ at _____
City County State Document Number
Married on _____ at _____
City County State Document Number

7. The said _____ was the _____
Son or Daughter Document Number
Of _____
Born on _____ at _____
City County State Document Number
Died on _____ at _____
City County State Document Number
_____ their spouse
Born on _____ at _____
City County State Document Number
Died on _____ at _____
City County State Document Number
Married on _____ at _____
City County State Document Number

8. The said _____ was the _____
Son or Daughter Document Number
Of _____
Born on _____ at _____
City County State Document Number
Died on _____ at _____
City County State Document Number
_____ their spouse
Born on _____ at _____
City County State Document Number
Died on _____ at _____
City County State Document Number
Married on _____ at _____
City County State Document Number

9. The said _____ was the _____
Son or Daughter Document Number
Of _____
Born on _____ at _____
City County State Document Number
Died on _____ at _____
City County State Document Number
_____ their spouse
Born on _____ at _____
City County State Document Number
Died on _____ at _____
City County State Document Number
Married on _____ at _____
City County State Document Number

Signature of Applicant: _____

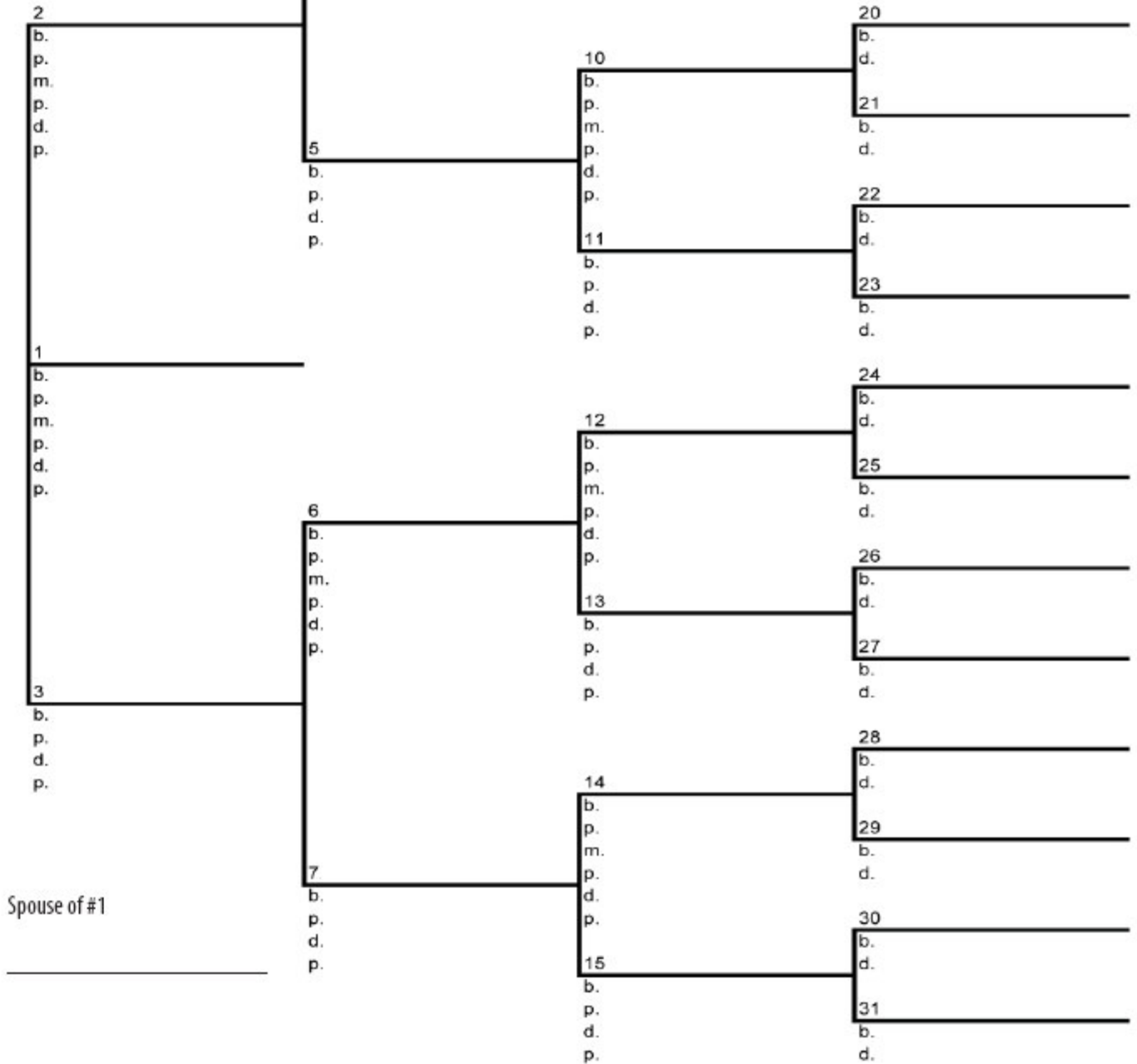
Five-Generation Ancestor Chart

Chart # _____

Prepared By	
Name _____	Date _____
Address _____	
City/State/Zip _____	
E-mail _____	

#1 on this chart is the same as
_____ on chart # _____

b= birth date
m= marriage date
d= death date
p=place



Spouse of #1
