



My Hudson Genealogical Study Group Dues Are Paid for the Year \_\_\_\_\_

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)

and \_\_\_\_\_ his wife

born on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

3. The said \_\_\_\_\_ was the \_\_\_\_\_

(son or daughter)

of \_\_\_\_\_

born on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

and \_\_\_\_\_ his wife

born on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

4. The said \_\_\_\_\_ was the \_\_\_\_\_  
(son or daughter)

of \_\_\_\_\_

born on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

and \_\_\_\_\_ his wife

born on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

5. The said \_\_\_\_\_ was the \_\_\_\_\_  
(son or daughter)

of \_\_\_\_\_

born on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

and \_\_\_\_\_ his wife

born on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_  
(City, County, State)

6. The said \_\_\_\_\_ was the \_\_\_\_\_

(son or daughter)

of \_\_\_\_\_

born on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

and \_\_\_\_\_ his wife

born on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

7. The said \_\_\_\_\_ was the \_\_\_\_\_

(son or daughter)

of \_\_\_\_\_

born on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

and \_\_\_\_\_ his wife

born on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

8. The said \_\_\_\_\_ was the \_\_\_\_\_

(son or daughter)

of \_\_\_\_\_

born on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

and \_\_\_\_\_ his wife

born on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

died on \_\_\_\_\_ at \_\_\_\_\_

(City, County, State)

### Requirements for Documentation the First Families of Hudson

Please refer to the Rules of Evidence Sheet included with this application.

Give volume and page for book references and include a photocopy, photograph, or other facsimile copy of the pertinent pages, and of all published or unpublished records used as proof. Typed, handprinted, 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. Information for additional ancestral lines may be included on blank pages, showing the tie-in to the line on the basic application. If more than two lines are submitted, please include an ancestral chart to show their interconnections. Only blood lines are accepted.

I, \_\_\_\_\_ do hereby attest that the statements set forth in this application are true to the best of my knowledge or belief.

*Signature of Applicant* \_\_\_\_\_ *Date* \_\_\_\_\_

For HGSG Use Only:

Application  accepted  rejected (see attached letter)

Proved Hudson Ancestors:

Name	ID #
_____	_____
_____	_____
_____	_____
_____	_____

\_\_\_\_\_

Date Application Received \_\_\_\_\_

Date Application Accepted \_\_\_\_\_

Approved by: