

# Allen County Genealogical Society of Indiana

A.C.G.S.I First Families  
 P.O. BOX 12003  
 Fort Wayne, IN 46862-2003

## First Families Application

**APPLICANT'S NAME:** \_\_\_\_\_  
 (as you want it to appear on the certificate: please print)

**ADDRESS:** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**ANCESTOR'S NAME:** \_\_\_\_\_  
 (as it will appear on the certificate)

Line of descent. List yourself in line 1. Proceed step by step to your pioneer ancestor. Do not skip any generation. Proof must be submitted for each generation. If needed, continue on the other side.

Name of ancestor	Year first proved in Allen Co., IN	Place of birth, state or country
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

It is my understanding that the material submitted with this application and pedigree chart will be given to the genealogy department of the Allen County Public Library to be included in their collection.

I do hereby affirm that the statements made in this application are true to the best of my knowledge.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_