



**THE OHIO GENEALOGICAL SOCIETY**

**MILITARY ORDER OF DAUGHTERS and SONS of OHIO**  
**Application**

Date Received	_____
Fee Paid	_____
Check Number	_____
OGS Member	_____
(For OGS Use Only)	

**Instructions to Applicant:** Please read the *Lineage Society Rules and Application Procedures* before completing this application. Do not write in shaded areas. List your main ancestral line on pages 2, 3, and 4, beginning with yourself as #1. Type or hand print all information. On the separate Document List page, list proof documents that accompany the application. Write specific document number(s) at the end of each application line to indicate source(s) of information. A typed, numbered list of source documents may be substituted for the Document List page. **Sign and date the application on the front page.** Any new or supplementary applicant must be a current member of The Ohio Genealogical Society. A non-refundable \$40 application fee must accompany the application. There is a \$10 non-refundable fee for supplemental applications. This application and accompanying documents become the property of The Ohio Genealogical Society. Mail application(s) and fees to:  
**Ohio Genealogical Society, 611 State Route 97 West, Bellville, Ohio 44813**

<b>Name of Applicant</b> –include maiden name if applicable	<b>Full Name of Spouse</b> – include maiden name if applicable
<b>Street Address</b>	<b>City/State/Zip</b>
<b>Email Address</b>	
<b>Phone</b>	

If this is a supplemental application, please write your Military Order of Daughters and Sons of Ohio number here \_\_\_\_\_

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 **MUST** be signed to be reviewed. This application, information, and all supporting documents and data become the property of the Ohio Genealogical Society. **CD's of your application are permissible (in PDF format) in addition to your paper application.** A CD is only a backup and must be complete. For questions or concerns, contact [modso@ogs.org](mailto:modso@ogs.org)

**MY Candidates for the MILITARY ORDER OF DAUGHTER AND SONS OF OHIO are:**

Name of Military Candidate Direct Relative or Collateral Relative (may be a living person or yourself)	Dates Served	Military Unit & Company	County of Residency in Ohio (If applicable)	Accepted OGS use only	MODSO Ancestor Number
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Please use additional sheet of paper if more than 8 candidates are being submitted.


**APPROVED BY: (For OGS Use Only)**

<b>Military Order of Daughters and Sons of Ohio Chair</b>	<b>Acceptance Date</b>	<b>MODSO Member Number</b>



5. The said \_\_\_\_\_ Is the son \_\_\_\_/daughter \_\_\_\_ of

Document Number

The said \_\_\_\_\_

Document Number

Born on \_\_\_\_\_ at \_\_\_\_\_  
First Middle Surname

Document Number

City County State

Document Number

Died on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

And his wife \_\_\_\_\_

Document Number

Born on \_\_\_\_\_ at \_\_\_\_\_  
First Middle Maiden Name

Document Number

City County State

Document Number

Died on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

Married on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

6. The said \_\_\_\_\_ Is the son \_\_\_\_/daughter \_\_\_\_ of

Document Number

The said \_\_\_\_\_

Document Number

Born on \_\_\_\_\_ at \_\_\_\_\_  
First Middle Surname

Document Number

City County State

Document Number

Died on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

And his wife \_\_\_\_\_

Document Number

Born on \_\_\_\_\_ at \_\_\_\_\_  
First Middle Maiden Name

Document Number

City County State

Document Number

Died on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

Married on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

7. The said \_\_\_\_\_ Is the son \_\_\_\_/daughter \_\_\_\_ of

Document Number

The said \_\_\_\_\_

Document Number

Born on \_\_\_\_\_ at \_\_\_\_\_  
First Middle Surname

Document Number

City County State

Document Number

Died on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

And his wife \_\_\_\_\_

Document Number

Born on \_\_\_\_\_ at \_\_\_\_\_  
First Middle Maiden Name

Document Number

City County State

Document Number

Died on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

Married on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

8. The said \_\_\_\_\_ Is the son \_\_\_\_/daughter \_\_\_\_ of

Document Number

The said \_\_\_\_\_

Document Number

Born on \_\_\_\_\_ at \_\_\_\_\_  
First Middle Surname

Document Number

City County State

Document Number

Died on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

And his wife \_\_\_\_\_

Document Number

Born on \_\_\_\_\_ at \_\_\_\_\_  
First Middle Maiden Name

Document Number

City County State

Document Number

Died on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number

Married on \_\_\_\_\_ at \_\_\_\_\_

Document Number

City County State

Document Number



MILITARY ORDER of DAUGHTERS and SONS of OHIO – Collateral Relative Application -  
Part B

**For Collateral relatives, please complete Part A of the application form first.**

Following is a list of my Collateral relatives(s)

Starting with #1 – give the name of the collateral person and on the next line their father as listed in Part A. Continue for all collateral persons you are submitting. If you have more than 6 collateral relatives at one time, you can use an additional piece of paper to add them.

1. \_\_\_\_\_ is the son \_\_\_ daughter \_\_\_  
of \_\_\_\_\_ in Part A of the application.

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

2. \_\_\_\_\_ is the son \_\_\_ daughter \_\_\_  
of \_\_\_\_\_ in Part A of the application.

Born on _____	at _____	_____	_____	_____	_____
		City	County	State	Document Number
Died on _____	at _____	_____	_____	_____	_____
		City	County	State	Document Number
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. \_\_\_\_\_ is the son \_\_\_ daughter \_\_\_  
of \_\_\_\_\_ in Part A of the application.

Born on _____	at _____	_____	_____	_____	_____
		City	County	State	Document Number
Died on _____	at _____	_____	_____	_____	_____
		City	County	State	Document Number
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. \_\_\_\_\_ is the son \_\_\_\_\_ daughter \_\_\_\_\_  
of \_\_\_\_\_ in Part A of the application.

Born on _____	at _____				_____
		City	County	State	Document Number
Died on _____	at _____				_____
		City	County	State	Document Number
Spouse _____					_____
		First	Middle	Maiden Name	Document Number
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. \_\_\_\_\_ is the son \_\_\_\_\_ daughter \_\_\_\_\_  
of \_\_\_\_\_ in Part A of the application.

Born on _____	at _____				_____
		City	County	State	Document Number
Died on _____	at _____				_____
		City	County	State	Document Number
Spouse _____					_____
		First	Middle	Maiden Name	Document Number
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. \_\_\_\_\_ is the son \_\_\_\_\_ daughter \_\_\_\_\_  
of \_\_\_\_\_ in Part A of the application.

Born on _____	at _____				_____
		City	County	State	Document Number
Died on _____	at _____				_____
		City	County	State	Document Number
Spouse _____					_____
		First	Middle	Maiden Name	Document Number
Born on _____	at _____				_____
		City	County	State	Document Number
Died on _____	at _____				_____
		City	County	State	Document Number
Married on _____	at _____				_____
		City	County	State	Document Number











