NCGS - APPLICATION HOMESTEADERS OF NOBLE COUNTY, INDIANA

Full Name of Applicant (as it is to appear on the certificate, print or type all information) Street Address					
Ancestor(s) of the application years.	ant proven to	have li	ved in the cou	anty 1876 to present minus 100	
•				Country or State	
Name of Ancestor(s)	Year S	ettled	Township	Ancestor came from	
way they choose, the mat	erial submit and may be _l	ted for the	ne Homestead d later. This a	l Society, Inc. to use, in any lers of Noble County. It will be application, information, and the County Genealogical	
Ι,				y swear that the statements set	
forth in this application as	re true to the	e best of	my knowledg	ge and belief.	
Signature of Applicant				Date	

Enclose a long, self-addressed, stamped envelope with the application, documentation and \$10.00 application fee (make checks payable to Noble County Genealogical Society) and mail to: NCGS – Homesteaders, P. O. Box 162, Albion IN 46701

NOBLE COUNTY GENEALOGICAL SOCIETY, INC

NCGS Homesteaders P. O. Box 162 Albion, IN 46701-0162

Homesteaders Application

APPLICANT'S NAME		
(as you want it	to appear on the certificate: please p	orint)
ADDRESS:	CITY	STATEZIP
ANCESTORS NAME:		
(as it will appear	on the certificate)	
	If in line 1. Proceed step by step	
	of must be submitted for each g	generation. If needed continue
on the other side.		
Name of ancestor	Year first proven in Noble Co. IN	Place of birth, state or country
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
way they choose, the materiadded to their collection and	the Noble County Genealogical al submitted for the Homestead may be published later. attements set forth in this applications.	ers of Noble County. It will be
Signature of the applicant _		Date