

FAMILY GROUP NO.

Husband's Full Name

This Information Obtained From:

Husband's Data	Day	Month	Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Husband
Birth							
Chr'nd							
Mar.							
Death							
Burial							

Places of Residence							
Occupation		Church Affiliation			Military Rec.		
Other wives, if any. No. (1) (2) etc. Make separate sheet for each mar.							
His Father				Mother's Maiden Name			

Wife's Full Maiden Name *LOUISA CHISOLM*

Wife's Data	Day	Month	Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Wife
Birth	1866			(1940 Census 44 (wid))		SC	4-24IVING
Chr'nd							
Death	1970			1970 LOUISA MIDDLETON			(50-WID)
Burial							

Compiller							
Places of Residence							
Address				Occupation if other than housewife			
City, State				Church Affiliation			
Date							
Her Father				Mother's Maiden Name			

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1866-1870

Sex	Children's Name in Full (Arrange in order of birth)	Children's Data	Day	Month	Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Children
1	<i>NORA</i> <i>Mitchell</i>	Birth	June	1880	82	(1920-40-wid)		(1930-48-wid)	
	Full Name of Spouse*	Mar.				<i>JAMES MITCHELL</i>			
		Death				<i>April 1882</i>	<i>HILTON HEAD SC</i>		<i>(DINEFIELD)</i>
		Burial							
2	<i>UNKNOWN</i> <i>Be...</i>	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
3		Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
5		Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
6		Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
7		Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
8		Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
9		Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
10		Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							

*If married more than once No. each mar. (1) (2) etc. and list in "Add info. on children" column. Use reverse side for additional children, other notes, references or information.

FAMILY GROUP NO.

Husband's Full Name *JAMES MITCHEL*

JAMES MITCHEL

This Information Obtained From:

Husband's Data	Day Month Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Husband
Birth					
Chr'nd					
Mar.					
Death					
Burial					

Places of Residence

Occupation Church Affiliation Military Rec.

Other wives, if any. No. (1) (2) etc. Make separate sheet for each mar.

His Father

Mother's Maiden Name

Wife's Full Maiden Name *NORA CHISOLM (LEWIS)*

NORA CHISOLM (LEWIS)

Wife's Data	Day Month Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Wife
Birth	1860 <i>1860</i>	(1910 Census 40 WID)			
Chr'nd	<i>JUNE 1880-82</i>	<i>(1910 Census 40 WID)</i>			<i>FIRST AFRICAN</i>
Death		<i>(1930 Census 48 - WA)</i>			
Burial		<i>1920 Census 40 WID</i>			

Compiler

Places of Residence

Address

Occupation if other than housewife

Church Affiliation

City, State

Other husbands, if any. No. (1) (2) etc. Make separate sheet for each mar.

Date

Her Father

Mother's Maiden Name

Sex	Children's Name in Full (Arrange in order of birth)	Children's Data	Day Month Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Children
1	<i>LUCIE</i>	Birth	<i>1908</i>	<i>(1920 Census 12 yrs)</i>			<i>(1930 - dead)</i>
	Full Name of Spouse*	Death	<i>Before 1930</i>				
2	<i>EVELYN A</i>	Birth	<i>18 NOV 1911</i>	<i>(1920 - IRACEE BIRD BATES)</i>			<i>FIRST AFRICAN</i>
	Full Name of Spouse*	Death	<i>Sept 2, 1991</i>	<i>(1930 - ARLINE 18 yrs)</i>			<i>HILTON HEAD, SC</i>
3		Birth					
	Full Name of Spouse*	Death					<i>PINEFIELD</i>
4		Birth					
	Full Name of Spouse*	Death					
5		Birth					
	Full Name of Spouse*	Death					
6		Birth					
	Full Name of Spouse*	Death					
7		Birth					
	Full Name of Spouse*	Death					
8		Birth					
	Full Name of Spouse*	Death					
9		Birth					
	Full Name of Spouse*	Death					
10		Birth					
	Full Name of Spouse*	Death					

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FAMILY GROUP NO.

Husband's Full Name

This Information Obtained From:

Husband's Date	Day	Month	Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Husband
Birth							
Chr'nd							
Mar.							
Death							
Burial							

Places of Residence							
Occupation			Church Affiliation			Military Rec.	
Other wives, if any. No. (1) (2) etc. Make separate sheet for each mar.							
His Father				Mother's Maiden Name			

Wife's Full Maiden Name *Lucile Chisolm*

Wife's Date	Day	Month	Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Wife
Birth	<i>1908</i>			<i>(1920 Census 12 yrs)</i>			
Chr'nd							
Death	<i>1930 or Before -</i>						
Burial							

Compiler	Places of Residence						
Address	Occupation if other than housewife			Church Affiliation			
City, State	Other husbands, if any. No. (1) (2) etc. Make separate sheet for each mar.						
Date	Her Father			Mother's Maiden Name			

Sex	Children's Name in Full (Arrange in order of birth)	Children's Date	Day	Month	Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Children
	<i>1 Lucille Chisolm</i>	Birth	<i>1925</i>			<i>(1930 Census 5 years)</i>			
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	<i>2 James</i>	Birth	<i>1927</i>			<i>(1930 Census 2 yr 9 months)</i>			
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	<i>3</i>	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	<i>4</i>	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	<i>5</i>	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	<i>6</i>	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	<i>7</i>	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	<i>8</i>	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	<i>9</i>	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	<i>10</i>	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							

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FAMILY GROUP NO.

Husband's Full Name

This Information Obtained From:

Husband's Data	Day	Month	Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Husband
Birth							
Chr'nd							
Mar.							
Death							
Burial							

Places of Residence

Occupation

Church Affiliation

Military Rec.

Other wives, if any. No. (1) (2) etc. Make separate sheet for each mar.

His Father

Mother's Maiden Name

Wife's Full Maiden Name

EVELYNIA MITCHELL

Wife's Data	Day	Month	Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Wife
Birth	18	NOV	1910				
Chr'nd							
Death	Sept 2,		1991				
Burial							

Compiler

Places of Residence

Address

Occupation if other than housewife

Church Affiliation

City, State

Other husbands, if any. No. (1) (2) etc. Make separate sheet for each mar.

Date

Her Father

Mother's Maiden Name

Sex	Children's Name in Full (Arrange in order of birth)	Children's Data	Day	Month	Year	City, Town or Place	County or Province, etc.	State or Country	Add. Info. on Children
	1 ANNIE (ANNIE MAE)	Birth				MARCH 10, 1931			
	Full Name of Spouse*	Mar.							
		Death				SEPT 26, 1979			
		Burial							
	2	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	3	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	4	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	5	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	6	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	7	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	8	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	9	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							
	10	Birth							
	Full Name of Spouse*	Mar.							
		Death							
		Burial							

* If married more than once No. each mar. (1) (2) etc. and list in "Add. info. on children" column. Use reverse side for additional children, other notes, references or information.

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Julia M. Bailey (912) 354-9067
 28 N. Parkwood Dr.
 Savannah, GA, 31404 **Family Group Record**



If typing, set spacing at 1 1/2. Page of

Husband Given name(s)		Last name		<input type="checkbox"/> See 'Other marriages'
Born (day month year)	Place	LDS ordinance dates		Temple
Christened	Place	Baptized		
Died	Place	Endowed		
Buried	Place	Sealed to parents		
Married	Place	Sealed to spouse		
Husband's father Given name(s)		Last name		<input type="checkbox"/> Deceased
Husband's mother Given name(s)		Maiden name		<input type="checkbox"/> Deceased

Wife Given name(s)		Maiden name		<input type="checkbox"/> See 'Other marriages'
Born (day month year)	Place	LDS ordinance dates		Temple
Christened	Place	Baptized		
Died	Place	Endowed		
Buried	Place	Sealed to parents		
Wife's father Given name(s)		Last name		<input type="checkbox"/> Deceased
Wife's mother Given name(s)		Maiden name		<input type="checkbox"/> Deceased

Children List each child (whether living or dead) in order of birth.		LDS ordinance dates		Temple
Sex	Given name(s)	Last name		<input type="checkbox"/> See 'Other marriages'
Born (day month year)	Place	Baptized		
Christened	Place	Endowed		
Died	Place	Sealed to parents		
Spouse Given name(s)		Last name		
Married		Place		Sealed to spouse

Sex	Given name(s)	Last name		<input type="checkbox"/> See Other marriages'
Born (day month year)	Place	Baptized		
Christened	Place	Endowed		
Died	Place	Sealed to parents		
Spouse Given name(s)		Last name		
Married		Place		Sealed to spouse

Sex	Given name(s)	Last name		<input type="checkbox"/> See 'Other marriages'
Born (day month year)	Place	Baptized		
Christened	Place	Endowed		
Died	Place	Sealed to parents		
Spouse Given name(s)		Last name		
Married		Place		Sealed to spouse

Select only one of the following options. The option you select applies to all names on this form.		Your name	
<input type="checkbox"/> Option 1—Family File Send all names to my family file at the _____ Temple	Address		
<input type="checkbox"/> Option 2—Temple File Send all names to any temple, and assign proxies for all approved ordinances			
<input type="checkbox"/> Option 3—Ancestral File Send all names to the computerized Ancestral File for research purposes only, not for ordinances. I am including the required pedigree chart.	Date prepared		
	Phone		

Write place as: North, P.O. Box, North Carolina, USA or St. Martins, Brougham, Warwick, Eng

Mother
daughters