

**HOPKINS COUNTY GENEALOGICAL SOCIETY  
FIRST FAMILIES OF HOPKINS COUNTY CERTIFICATE  
PIONEER FAMILIES OF HOPKINS COUNTY CERTIFICATE**

The Hopkins County Genealogical Society is offering a commemorative **FIRST FAMILIES OF HOPKINS COUNTY CERTIFICATE** for families who came to Hopkins County prior to March 25, 1871, and also **PIONEER FAMILIES OF HOPKINS COUNTY CERTIFICATE** for families in Hopkins County from March 26, 1871 to March 25, 1896. Anyone directly or collaterally descended from a Hopkins County resident from March 25, 1846 to March 25, 1896 may apply for this permanent remembrance of his or her family history. Collateral descent must be through a brother or sister of the early resident of Hopkins County. The information that applicants provide as proof of lineage will be a valuable addition to the history of Hopkins County and a source of information for future generations.

**ELIGIBILITY:** To qualify for a **FIRST FAMILIES OF HOPKINS COUNTY CERTIFICATE**, the applicant must directly or collaterally descend from an ancestor who settled in Hopkins County prior to March 26, 1871. To qualify for a **PIONEER FAMILIES OF HOPKINS COUNTY CERTIFICATE**, the applicant must directly or collaterally descend from an ancestor who resided in Hopkins County from March 26, 1871 to March 25, 1896. The applicant must be able to prove descent from the ancestor (male or female) by an official record or records from each generation, including proof for the applicant. Proof that the ancestor was in Hopkins County by this date should also be provided by an official document. Current Hopkins County residency or HCGS membership is not necessary. Eligibility shall be determined by a committee appointed by the Hopkins County Genealogical Society. The committee's decision shall be final.

**INSTRUCTIONS:** Complete to the best of your ability the lineage chart (line of descent) on the enclosed application. If you have more than one early Hopkins County ancestor, complete a separate application for each ancestor. Only one ancestor will be inscribed on a certificate except when the ancestor and spouse both qualify. Make as many copies of the application as you need. Family group records on supplementary forms including names of children, dates, and places of birth, marriage, and death. Also include names of spouses, including the applicant's family may be attached to the application if desired. The applicant may also use the standard Family Group Sheet. This is an excellent way to preserve your research information. **ALL PAGES MUST BE LETTER SIZE (8½ X 11) PAPER.**

**PROOF OF DESCENT:** To ensure that the certificate is the result of credible genealogical research, the following **PRIMARY SOURCES** are deemed acceptable: Vital records (birth, marriage, and death): Probate records: all circumstantial evidence but must be supported by an explanation: Land, tax, military service, church, cemetery and tombstone is encouraged but **MAY NOT BE ACCEPTED** as proof of lineage: newspaper clippings, published family histories, published county history, published biographical records, and city and county directories. Private papers and personal records such as letters, diaries, journals, and reminiscences may be evaluated on an individual basis.

**SUBMITTED MATERIALS:** All applicants and verifying materials becomes the property of the Hopkins County Genealogical Society. The Society plans to publish a book of all qualifying applications. No original documents should be submitted. Send a photocopy or other facsimile copy of pertinent materials. Applicants are encouraged to include biographical information on their early Hopkins County ancestor. Incorrect or incomplete applications will be returned for corrections and additions and the applicant will be encouraged to resubmit the application.

Applications and photocopied proof of descent along with \$25.00 check or money order for **FIRST FAMILIES OF HOPKINS COUNTY CERTIFICATE** and for **PIONEER FAMILIES OF HOPKINS COUNTY CERTIFICATE**, which is not refundable, payable to the Hopkins County Genealogical Society should be mailed to:

**FIRST/PIONEER FAMILIES OF HOPKINS COUNTY CERTIFICATE**  
Hopkins County Genealogical Society  
PO Box 624  
Sulphur Springs, TX 75482-0624

**HOPKINS COUNTY GENEALOGICAL SOCIETY  
FIRST/PIONEER FAMILIES OF HOPKINS COUNTY TEXAS CERTIFICATE  
APPLICATION**

Instructions to Applicant: Fill in all blanks, beginning with yourself as the first generation. TYPE OR PRINT ALL INFORMATION. A check or money order for \$25.00 for FIRST FAMILIES OF HOPKINS COUNTY certificate or for PIONEER FAMILIES OF HOPKINS COUNTY certificate must accompany each application. This fee is not refundable.

**A. Applicant**

\_\_\_\_\_  
(Name of applicant as it will appear on certificate)

\_\_\_\_\_  
(Name of certificate applying for)

\_\_\_\_\_  
(Address of applicant)

\_\_\_\_\_  
(City, State and Zipcode)

**B. Name of Ancestor**

\_\_\_\_\_  
(Name of qualifying ancestor who was in Hopkins County Texas prior to 1871 or from 1871 to 1896.)

\_\_\_\_\_  
(Date of Birth)                      (Place of Birth)

\_\_\_\_\_  
(Date of Death)                      (Place of Death)

\_\_\_\_\_  
(Date of Marriage)      (Place of Marriage)

\_\_\_\_\_  
(Name of Spouse)

\_\_\_\_\_  
(Date of Arrival in Hopkins County - Place of Residence)

\_\_\_\_\_  
(Ancestor emigrated from)

<b>HCGS USE ONLY</b>	
FILE NUMBER	_____
NAME	_____
	(ANCESTOR)
DATE RECEIVED	_____
DATE COMPLETED	_____
DATE	_____
	(CERTIFICATE ISSUED)
COMMENTS:	_____
	_____
	_____
	_____

**C. Biography of Ancestor:** This should include occupation, military service, religious preference and any other information known of a historical or genealogical value. Additional pages may be attached.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**HOPKINS COUNTY GENEALOGICAL SOCIETY**  
**FIRST/PIONEER FAMILIES OF HOPKINS COUNTY TEXAS CERTIFICATE**

1. FULL NAME OF APPLICANT \_\_\_\_\_

DATE AND PLACE OF BIRTH \_\_\_\_\_

(Day, Month, Year)

(Town, County, State)

(All dates should be written as Day, Month, Year. Example: 25 Mar 1846)

NAME OF SPOUSE \_\_\_\_\_

I am the child of

\_\_\_\_\_ (Father) born on \_\_\_\_\_ at \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_ and his ( ) wife

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

2. The said \_\_\_\_\_ was the child of

\_\_\_\_\_ (Father) born on \_\_\_\_\_ at \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_ and his ( ) wife

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

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

\_\_\_\_\_ (Father) born on \_\_\_\_\_ at \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_ and his ( ) wife

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

4. The said \_\_\_\_\_ was the child of

\_\_\_\_\_ (Father) born on \_\_\_\_\_ at \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_ and his ( ) wife

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

5. The said \_\_\_\_\_ was the child of

\_\_\_\_\_ (Father) born on \_\_\_\_\_ at \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_ and his ( ) wife

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

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

\_\_\_\_\_ (Father) born on \_\_\_\_\_ at \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_ and his ( ) wife

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

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

\_\_\_\_\_ (Father) born on \_\_\_\_\_ at \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_ and his ( ) wife

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

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

\_\_\_\_\_ (Father) born on \_\_\_\_\_ at \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_ and his ( ) wife

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

**HOPKINS COUNTY GENEALOGICAL SOCIETY  
FIRST/PIONEER FAMILIES OF HOPKINS COUNTY TEXAS CERTIFICATE**

List sources of proof by generation. Number photocopied proofs to correspond to generation numbers. The applicant's name should be placed on the back of each photocopied proof.

Generation 1 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Generation 2 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Generation 3 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Generation 4 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Generation 5 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Generation 6 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Generation 7 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Generation 8 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The information included in this application is true and accurate according to the best of my knowledge. I acknowledge that this application and verifying material becomes the property of Hopkins County Genealogical Society and give permission for said data to be published.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Submitted

# FIRST/PIONEER FAMILIES OF HOPKINS COUNTY TEXAS CERTIFICATE

## SUPPLEMENTAL FORM

Complete this supplementary form or a similar form for each generation in the application. This information will be an important addition to your family history. Make as many copies of this form as you need.

FATHER'S FULL NAME \_\_\_\_\_

EVENT	DAY MONTH YEAR	CITY TOWN OR PLACE	COUNTY	STATE	OTHER INFORMATION
BIRTH					
MAR					
DEATH					
BURIAL					

PLACES OF RESIDENCE \_\_\_\_\_

OCCUPATION \_\_\_\_\_ CHURCH AFFILIATION \_\_\_\_\_ MILITARY SERVICE \_\_\_\_\_

OTHER SPOUSE(S) \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ MOTHER'S MAIDEN NAME \_\_\_\_\_

MOTHER'S FULL NAME \_\_\_\_\_

EVENT	DAY MONTH YEAR	CITY TOWN OR PLACE	COUNTY	STATE	OTHER INFORMATION
BIRTH					
MAR					
DEATH					
BURIAL					

PLACES OF RESIDENCE \_\_\_\_\_

OCCUPATION \_\_\_\_\_ CHURCH AFFILIATION \_\_\_\_\_ MILITARY SERVICE \_\_\_\_\_

OTHER SPOUSE(S) \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ MOTHER'S MAIDEN NAME \_\_\_\_\_

CHILDREN	EVENT DAY MONTH YEAR	CITY TOWN PLACE	COUNTY	STATE
1	BIRTH			
	MAR			
SPOUSE	DEATH			
	BURIAL			
2	BIRTH			
	MAR			
SPOUSE	DEATH			
	BURIAL			
3	BIRTH			
	MAR			
SPOUSE	DEATH			
	BURIAL			
4	BIRTH			
	MAR			
SPOUSE	DEATH			
	BURIAL			

NAME AND ADDRESS OF COMPILER \_\_\_\_\_