

National No.....



State Name.....

State No.....

Chapter Name .....

Chapter No.....

# National Society of United States Daughters of 1812

This blank sent out..... by.....  
(Date) (Name of Sender)

This blank mailed Registrar National..... by.....  
(Date)

## APPLICATION FOR MEMBERSHIP OF

Married Name in Full *Mrs Gertrude Reineke Simons*  
Address in Full *2500 Vermont Lawrence Douglas Kansas*  
(Street) (City) (County) (State)  
Maiden Name *Gertrude Reineke*

## IN RIGHT OF DESCENT FROM

Name of Ancestor *Dr John Buckley*  
Ancestor's Service *Pvt. Capt Jacob Elliston's Co, Johnson's Mounted Regulars, Ken. Vols. 1812*  
Application received by State Registrar (date).....  
Initiation fee and dues received by State Registrar (date).....  
Approved by State Registrar (date).....  
Signature of State Registrar.....  
Applicant approved by the State Society (date).....

When filled out send this paper with the initiation fee of two dollars and annual dues of.....  
dollars to the Chapter Registrar if joining a chapter, otherwise to the State Registrar.

Name of Registrar.....  
Address .....

WE, the undersigned, recommend the foregoing applicant for membership in the Society.

..... Address.....  
..... Address.....

Signatures of vouchers who are not members of the Society must be accompanied by letters of reference, endorsing the applicant, to put on file with the blank. This blank will then be signed by the Registrar of the State.

.....  
State Registrar.

NOTICE: ALL BLANKS MUST BE TYPEWRITTEN.

Do not encroach upon this margin