



# PIONEER FAMILIES OF SOUTHWESTERN PENNSYLVANIA

## WHO QUALIFIES?

The Pioneer Family ancestor(s) must have been a resident of Southwestern Pennsylvania which includes any county that borders Washington County in Pennsylvania. They include Westmoreland 1773, Washington 1781, Fayette 1783, Allegheny 1788, Greene 1796 and Beaver 1800.

## MEMBERSHIP

The Pioneer Families of Southwestern Pennsylvania (“PFSP”) is open to any member of the Genealogical Society of Southwestern Pennsylvania (“GSSWPA”) who can prove they are a direct descendant from an ancestor who resided in what is that part of Pennsylvania covering the six counties of Southwestern Pennsylvania at the level listed below. You can request an application form and rules of documentation by sending a self-addressed, stamped envelope (“SASE”) to the Genealogical Society of Southwestern Pennsylvania, P.O. Box 894, Washington, PA 15301-0894. Applications are only accepted on our forms and accompanied by a nonrefundable fee of \$50.00, no matter how many ancestors you submit now or in the future. An annual recognition program will be held for the presentation of awards to members of PFSP.

## LEVEL OF MEMBERSHIP

Up to, and including, 1810 is a Gold Member and from 1811 to 1830 is a Silver Member.

## APPLICATION PROCESS

Applications are due by June 1<sup>st</sup> of each year with a recognition program for those qualified Pioneer Families in the last quarter of the same year.

The one-time nonrefundable fee of \$50.00 must accompany the initial application. You may submit as many applications as you desire. Each application is considered individually.

## BASIC RULES

The rules of evidence applying to membership in **Pioneer Families of Southwestern Pennsylvania** follow and are the standards by which PFSP proof is judged. There are no exceptions.

The extent and nature of the evidence submitted as proof in all applications shall be sufficient to prove that the applicant is directly descended from the pioneer ancestor(s) named on the PFSP application blank, and sufficient to differentiate between any two persons of the same name residing in the same area at the same time. Proof must be included to show residence in Southwestern Pennsylvania by 1810 or 1830. Again acceptance to PFSP at the membership level of 1810 becomes a Gold member and from 1811 to 1830 becomes a Silver member. Documentation MUST be provided for each date listed, even if only an approximation (i.e. born c1781- 1790 as per 1820 census).

## **FILLING OUT THE FORM**

1. Each document submitted must include a complete citation on the **front** of the document. Any applications without citations will be returned. Examples of proper citation may be found in Elizabeth Shown Mills', Evidence! *Citation and Analysis for the Family Historian*. Baltimore: GPC, 1997. See Below.
2. Standardization in filling out the forms eliminates confusion therefore, here is how to write the dates:  
Circa 1810 10 Oct 1810 Bef. 10 Oct. 1810; Aft. 10 Oct. 1810.  
Cite a source for your Documents; Will; Book 1, Pg 3, Court House, Washington Co., PA  
Deed Book 2, Pg 1, Fayette Co., PA
3. Document numbers should be entered in numerical order on the Documentation pages. They will not necessarily be in numerical order on pages, since one document may be used to prove more than one fact, And a fact may have more than one piece of documentation.

A Will might prove date of death of an individual and also the married name of a daughter.

A death date might be documented by a death certificate, a tombstone photograph, and/or an obituary.

## **BASIC RULES OF EVIDENCE**

### **THIS APPLICATION AND THE ACCOMPANING PROVING DOCUMENTS WILL BE ADJUDGED AS FOLLOWS:**

1. PRIMARY (Birth, death, and marriage) EVIDENCE FROM VITAL STATISTICS, COURT HOUSE OR OTHER GOVERNMENT RECORDS, CHURCH AND SCHOOL RECORDS, ETC. IS CONSIDERED USUALLY TO BE BEYOND DOUBT, AND EXCELLENT PROOF.
2. SECONDARY EVIDENCE, SUCH AS CENSUS RECORDS, NEWSPAPER CLIPPINGS, OLD LETTERS, BIBLE OR OTHER FAMILY RECORDS, CONTEMPORARY TO THE FACTS REPORTED, IS CONSIDERED ALMOST AS AUTHENTIC.
3. CIRCUMSTANTIAL EVIDENCE, OR HEARSAY, IS **NOT** CONSIDERED AS PROOF UNLESS BACKED UP BY PRIMARY, OR SECONDARY EVIDENCE.
4. ORAL, WRITTEN, OR PUBLISHED FAMILY TRADITIONS ARE VERY OFTEN WRONG AND ARE **NOT** ACCEPTED AS PROOF.
5. ALL PROOF DOCUMENTS MUST BY THEMSELVES, OR IN COMBINATION WITH OTHER DOCUMENTS, ACTUALLY STATE THE FACT TO BE PROVED. **IMPLIED** EVIDENCE IS **NOT** ACCEPTED AS PROOF.
6. PRINTED OR MANUSCRIPT GENEALOGIES, GENEALOGICAL RECORDS OR COMPILATIONS, FAMILY GROUP SHEETS AND CHARTS, FAMILY REUNION RECORDS AND SIMILAR MATERIAL ARE **NOT** CONSIDERED PROOF. UNSUPPORTED INFORMATION FROM AN AMATEUR OR PROFESSIONAL GENEALOGIST IS **NOT** ACCEPTABLE, INCLUDING SUCH RECORDS PRINTED IN ANY GENEALOGICAL, HISTORICAL OR SIMILAR PUBLICATION.
7. LINEAGE PAPERS, ACCEPTED OR UNACCEPTED, FROM OTHER PATRIOTIC OR HEREDITARY SOCIETIES, BY THEMSELVES, ARE NOT CONSIDERED PROOF. THE **DOCUMENT COPIES** WHICH WERE USED TO PROVE THE LINEAGE **MIGHT** BE CONSIDERED PROOF FOR (PFSP) IF THEY FOLLOW THESE RULES.
8. MATERIALS AUTHORED BY THE APPLICANT OR A MEMBER OF HIS FAMILY **CANNOT** BE CONSIDERED AS PROOF.
9. THE DIRECT LINE FROM APPLICANT TO THE FAMILY ANCESTOR MUST BE PROVED AT EVERY STEP. BLOOD LINE DESCENT ONLY IS ACCEPTABLE; ADOPTED CHILDREN **DO NOT** QUALIFY AS A STEP IN THE LINAGE.
10. YOUR NAME AND ADDRESS MUST BE ON THE REVERSE OF EVERY PIECE OF PAPER SUBMITTED.
11. DOCUMENTS WRITTEN IN A FOREIGN LANGUAGE MUST ACCOMPANIED BY A TRANSLATION CERTIFIED AS A "TRUE TRANSLATION" BY THE TRANSLATOR (**NOT** THE APPLICANT OR A FAMILY MEMBER).
12. TOMBSTONE PHOTOGRAPHS MUST BE LEGIBLE AND ACCOMPANIED BY A TRANSCRIPTION OF THE STONE.
13. FEMALE ANCESTORS LIVING IN SOUTHWESTERN PENNSYLVANIA BEFORE DECEMBER 31 [1830] MUST BE IDENTIFIED BY THEIR MAIDEN NAME
14. MARRIED FEMALE APPLICANTS MUST INCLUDE A COPY OF THEIR MARRIAGE RECORD, IF THEY USE THEIR HUSBAND'S SURNAME.
15. DOCUMENTS USED AS PROOF MUST, EITHER ALONE OR IN CONJUNCTION WITH ACCEPTABLE DOCUMENTS, ACTUALLY STATE THE FACT TO BE PROVED.

Example of implied proof which are **not** acceptable are:

- A. Unnamed individual specified in court records as “heirs” or “heirs-at-law” unless it is known that applicable laws at the time included only bloodline descendants.
- B. Census records which show the name of the head of the family only, along with numbers of family members or others by age group, prove only the family head actually named. Next door or close neighbors on a census or tax record do **not** prove any relationship by themselves.
- C. A father is **not** proved as being in an area just because his child was born there. The birth only proves the mother was there.
- D. Blood descent is **not** necessarily proved by owning the same land as an earlier owner by the same name, weather the land was inherited or purchased.

# PIONEER FAMILIES OF SOUTHWESTERN PENNSYLVANIA



## APPLICATION FORM

Name of Ancestor \_\_\_\_\_  
County of Residence \_\_\_\_\_ year \_\_\_\_\_ (Gold)

Name of Ancestor \_\_\_\_\_  
County of Residence \_\_\_\_\_ year \_\_\_\_\_ (Silver)

\*\*\*\*\*

1. I \_\_\_\_\_  
First Middle Maiden name Surname  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State

2. I am the child of \_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State  
died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State  
married (name) \_\_\_\_\_ who was  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State  
died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State  
married on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State

3. The said \_\_\_\_\_ was the \_\_\_\_\_  
Son or daughter  
of \_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State  
died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State  
married (name) \_\_\_\_\_ who was  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State  
died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State  
married on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
City County State

4. The said \_\_\_\_\_ was the \_\_\_\_\_  
of \_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_ City County State Doc # \_\_\_\_\_  
married (name) \_\_\_\_\_ who was \_\_\_\_\_ City County State  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_ City County State Doc # \_\_\_\_\_  
married on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
City County State

5. The said \_\_\_\_\_ was the \_\_\_\_\_  
of \_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_ City County State Doc # \_\_\_\_\_  
married (name) \_\_\_\_\_ who was \_\_\_\_\_ City County State  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_ City County State Doc # \_\_\_\_\_  
married on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
City County State

6. The said \_\_\_\_\_ was the \_\_\_\_\_  
of \_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_ City County State Doc # \_\_\_\_\_  
married (name) \_\_\_\_\_ who was \_\_\_\_\_ City County State  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_ City County State Doc # \_\_\_\_\_  
married on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
City County State

7. The said \_\_\_\_\_ was the \_\_\_\_\_  
of \_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_ City County State Doc # \_\_\_\_\_  
married (name) \_\_\_\_\_ who was \_\_\_\_\_ City County State  
born on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_ City County State Doc # \_\_\_\_\_  
married on \_\_\_\_\_ at \_\_\_\_\_ Doc # \_\_\_\_\_  
City County State

8. The said \_\_\_\_\_ was the \_\_\_\_\_  
 of \_\_\_\_\_  
 Son or Daughter  
 born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 married (name) \_\_\_\_\_ who was \_\_\_\_\_  
 born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 married on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State

9. The said \_\_\_\_\_ was the \_\_\_\_\_  
 of \_\_\_\_\_  
 Son or Daughter  
 born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 married (name) \_\_\_\_\_ who was \_\_\_\_\_  
 born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 married on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State

10. The said \_\_\_\_\_ was the \_\_\_\_\_  
 of \_\_\_\_\_  
 Son or Daughter  
 born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 married (name) \_\_\_\_\_ who was \_\_\_\_\_  
 born on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 died on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State  
 married on \_\_\_\_\_ at \_\_\_\_\_ Doc# \_\_\_\_\_  
 City County State

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**First Family Ancestor** \_\_\_\_\_

**Name (incl. maiden name)** \_\_\_\_\_ **GSSWPA member#** \_\_\_\_\_

**Full Name of Spouse (if Applicable)** \_\_\_\_\_

**Street Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Telephone (\_\_\_\_)** \_\_\_\_\_ **E-mail address** \_\_\_\_\_

**I, (print name)** \_\_\_\_\_, **do certify that the information contained in this application is true to the best of my knowledge. I understand that this application and the enclosed documents will become the property of the Genealogical Society of Southwestern Pennsylvania.**

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



*Pioneer Families of Southwestern Pennsylvania*

Doc # \_\_\_\_\_ Description: \_\_\_\_\_

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Doc # \_\_\_\_\_ Description: \_\_\_\_\_

Doc # \_\_\_\_\_ Description: \_\_\_\_\_

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First Family Ancestor \_\_\_\_\_

Name (incl. maiden name) \_\_\_\_\_ GSSWPA member # \_\_\_\_\_

Full Name of Spouse (if Applicable) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ E-mail address \_\_\_\_\_

I, (print name) \_\_\_\_\_, do certify that the information contained in this application is true to the best of my knowledge. I understand that this application and the enclosed documents will become the property of the Genealogical Society of Southwestern Pennsylvania.

*Applicant's Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

# Pioneer Families of Southwestern Pennsylvania

## APPLICATION

*INSTRUCTIONS TO APPLICANT: Fill in blocks A, B, C, and E on this page. List your main ancestral line on page 2 and 3, beginning with yourself as # 1. Type or handprint all information. A check for \$50.00 must accompany the application. There is no additional charge for supplementary applications. Any new or supplementary applicants must be a current member of The Genealogical Society of Southwestern Pennsylvania. Application fee is non-refundable.*

### A

|                              |                |       |     |
|------------------------------|----------------|-------|-----|
| Applicant's name             | Street Address |       |     |
| Full name of husband or wife | Town           | State | Zip |

### B

| NAME OF ANCESTOR | Year First approved in Southwestern PA | County First proved in Southwestern PA | State or Country Ancestor came from |
|------------------|----------------------------------------|----------------------------------------|-------------------------------------|
|                  |                                        |                                        |                                     |
|                  |                                        |                                        |                                     |
|                  |                                        |                                        |                                     |
|                  |                                        |                                        |                                     |
|                  |                                        |                                        |                                     |

### C

|                                                                                 |
|---------------------------------------------------------------------------------|
| My Genealogical Society of Southwestern Pennsylvania Dues are paid for the year |
|---------------------------------------------------------------------------------|

### D

| THE GENEALOGICAL SOCIETY<br>SOUTHWESTERN PA USE ONLY | I. D. Number | E<br>FILLED BY APPLICANT<br>(print or type)                 |
|------------------------------------------------------|--------------|-------------------------------------------------------------|
| 1.                                                   |              | Name                                                        |
| 2.                                                   |              | (print or type)                                             |
| 3.                                                   |              | Society Name                                                |
| 4.                                                   |              | F<br>GSSWPA USE ONLY<br>Pioneer Families of Southwestern PA |
| 5.                                                   |              | Date of Application Received                                |
| 6.                                                   |              | Acceptance Date                                             |
| 7.                                                   |              | Fee Received                                                |
| 8.                                                   |              |                                                             |
| 9.                                                   |              |                                                             |
| 10.                                                  |              |                                                             |
| 11.                                                  |              |                                                             |

### APPROVED BY:

Pioneer Families of Southwestern PA  
Committee \_\_\_\_\_

Date \_\_\_\_\_