



# National Society Daughters of CSA Officers Corps

## SUPPLEMENTAL Application Sheet

(This is a hot file and must be completed on your computer. Save the file first, then enter your information; save again and then print.) Handwritten documents are not accepted and will be returned.

Name (as you want it on certificate) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth (mmm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_ Member # \_\_\_\_\_

**SUPPLEMENTAL Ancestor information (Lineage Tree also required):** If a collateral ancestor, please complete 2 trees – one to and one from MRCA (Most Recent Common Ancestor) to your relative. Each Supplemental application must stand on its own with proofs. Please keep a copy of your entire application and this form.

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Rank \_\_\_\_\_ Office Held (Civilian) \_\_\_\_\_

CSA Army  CSA Navy  Surgeon  Chaplain  Civilian \_\_\_\_\_

State \_\_\_\_\_ Company \_\_\_\_\_ Unit \_\_\_\_\_ Reg't \_\_\_\_\_

Enlistment date (mmm/dd/yyyy) \_\_\_\_\_ Location \_\_\_\_\_

Final date (mmm/dd/yyyy) \_\_\_\_\_ Location \_\_\_\_\_

Died of illness  KIA  POW  Paroled  Resigned / Retired  Secession Convention  Civil Service (elected, appointed, etc.) – Please describe service, location, dates, and any pertinent details on separate sheet. **Proofs must**

**be provided for all lineage and service.**

Please contact [registrar.nsdcsaoc@gmail.com](mailto:registrar.nsdcsaoc@gmail.com) if you have any questions.

**Mail the \$25 supplemental fee payable to NSDCSAOC, this form, lineage tree, and proofs to:**

Golda Foster – McMahon, Registrar General, PO Box 3311, San Angelo, TX 76902-3311.

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

Signature of Registrar \_\_\_\_\_ Date \_\_\_\_\_