

THE DOANE FAMILY ASSOCIATION OF AMERICA, INC.

Please use a separate sheet for each head of family.

PLEASE SEND TO:

National Historian, DFA
 Katherine K Blair, Historian
 Doane Family Association
 1024 South Ironwood Rd.
 Staunton, VA 20164-5111

Family Record of: Name _____

Address: _____

Area Code and Telephone Number _____

Line Of Descent: (From John Doane or earliest known ancestor): _____

Number in A.A. Doane book, if known: _____

Where was information shown on this family record obtained?

HUSBAND: _____

Birth _____ Place _____

Married _____ Place _____

Death _____ Place _____

Burial _____ Place _____

Father _____ Mother (Maider Name) _____

Other wives, if any _____

WIFE: _____

Birth _____ Place _____

Death _____ Place _____

Burial _____ Place _____

Father _____ Mother (Maider Name) _____

Other husbands, if any _____

Name, Address, Area Code and Telephone Number of person submitting this sheet:

Male or Female	CHILDREN (Give Names in Full in order of Birth)	WHEN BORN			WHERE BORN		State of Country	DIED			MARRIED
		Month	Day	Year	Town	County		Month	Day	Year	
1											Date _____ To _____
2											Date _____ To _____
3											Date _____ To _____
4											Date _____ To _____
5											Date _____ To _____
6											Date _____ To _____
7											Date _____ To _____
8											Date _____ To _____
9											Date _____ To _____
10											Date _____ To _____