

THOMAS MUNSON FOUNDATION

Individual Data Sheet

Information About the Preparer

Data Sheet prepared by*: _____
Name Date

Preparer's contact (e-mail address or postal address) *:

Another contact (including personal website) for preparer:

Please Note: In order to tie the *Subject* (as identified in A. below) of this Data Sheet into the Munson family, please provide as much of the following information as possible.

Information About the Subject's Parents

1. Clan* (check one):

- Unknown Abel Amme Benjamin Caleb Daniel Ebenezer Elizabeth
 Ephraim Israel Jabez Joel John Joshua Lydia Moses Obadiah
 Solomon Theophilus Timothy Tuttle Waitstill William

2. Father's full name: _____

Munson Descendant? Yes No Generation Number: _____ Record Number: _____

3. Mother's full name: _____

Munson Descendant? Yes No Generation Number: _____ Record Number: _____

Information About the Subject

A. Subject's full name at birth (First, Middle, Last) *:

B. Sex*: Female Male Generation Number: _____

C. Adopted*? Yes No
If Yes: Full adopted name (First Middle Last):

Father listed above is: Birth Adopted Mother listed above is: Birth Adopted

D. Subject's current or final full name, including any Title or Prefix, Jr., III, etc.:

Title Full Name (First Middle Last and Jr., III, etc.)

E. Birth date (please use dd Mon yyyy format): _____

F. Birth place
Within USA: _____
City, County State

Outside USA: _____
City Country

G. Place of current or last known residence: _____

H. Is the subject still living? Yes No
If No: Death Date (dd Mon yyyy): _____ Death Place: _____
Burial Place: _____

I. Marital Status (current or at time of death): Unknown Single Married Widowed
 Divorced

J. Education (name of institutions, graduation dates, type of diploma, degree or degrees):

K. Occupation(s): _____

L. Military Service (branch of service, dates, final rank, awards, battles): _____

M. Religious Affiliation: _____

N. Public Service: _____

O. Number of Marriages: _____
List the Subject's marriages in order. Include maiden names, if applicable.
Spouse's Full Name Marriage Date Marriage Place
(First Middle Last) (dd Mon yyyy) (County, State)

Spouse's Full Name (First Middle Last)	Marriage Date (dd Mon yyyy)	Marriage Place (County, State)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Additional Marriages:

P. Number of Children
List the Subject's children in birth order. Also specify which spouse (by number) is the other parent.

Sex (F/M)	Child's Full Name (First Middle Last)	Birth Date (dd Mon yyyy)	Birth Place	Spouse Number
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

Additional Children:

Q. Subject's spouse's parents' names and information (include spouse number):

R. Organizations: _____

S. Nicknames or Alternate names (not listed elsewhere on this form): _____

T. Other Residence(s) (not listed elsewhere on this form): _____

U. Please provide any of the following: Additional biographical data regarding the Subject / Personal anecdotes or interesting stories about the Subject / Personal involvement of the Subject in activities of possible historic interest.

