

Please send this form along with \$25.00 payment for initial research. We will then advise if there are additional resources in our society and let you know how much extra to remit. Make check payable to the Historical Society of Schuylkill County and send to:

Name of Child: \_\_\_\_\_

Birth Date and Location: \_\_\_\_\_

Death Date and Location: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Birth Date and Location: \_\_\_\_\_

Death Date and Location: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Birth Date and Location: \_\_\_\_\_

Death Date and Location: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Birth Date and Location: \_\_\_\_\_

Death Date and Location: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

\*\* List any additional children and their information on a separate sheet.

**Exactly what information are you requesting? Please be brief and as specific as possible. Thank You.**

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