

## Genealogy Research Request Form

You may not be able to fill in all of the blanks, but, please fill in as much as you can. If your ancestor(s) had a nick-name please enter it in the form below. Add any other information that may be helpful. When filling in locations, please list as city, county, state, country. Please print!

Ancestor's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_

Additional information: \_\_\_\_\_

\_\_\_\_\_

Spouse's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_

Date of marriage: \_\_\_\_\_ Place of marriage: \_\_\_\_\_

Additional information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Information on the children of your ancestor will be helpful in my research.

Child's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_

Additional information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Spouse's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_

Date of marriage: \_\_\_\_\_ Place of marriage: \_\_\_\_\_

Additional information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Child's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_

Additional information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Spouse's name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_  
Date of marriage: \_\_\_\_\_ Place of marriage: \_\_\_\_\_  
Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Child's name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_  
Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Spouse's name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_  
Date of marriage: \_\_\_\_\_ Place of marriage: \_\_\_\_\_  
Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Child's name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_  
Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Spouse's name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_  
Date of marriage: \_\_\_\_\_ Place of marriage: \_\_\_\_\_  
Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Child's name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_  
Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Spouse's name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
Date of death: \_\_\_\_\_ Place of death: \_\_\_\_\_  
Date of marriage: \_\_\_\_\_ Place of marriage: \_\_\_\_\_  
Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Researching your family tree will be done in my spare time. Also, depending on the volume of requests, delays may occur.

Research Fees: \$25.00 for the first hour. \$20.00 per hour after the initial search.

Additional Fees: I may have to contact archives that require payment for documents pertaining to your ancestor(s). Most archives charge \$10 to \$50 per document. You will be contacted before the documents are ordered.

All fees are non-refundable.

Printing: When your document is ready for print you will be contacted about format and price list. Prices will vary between formats.

Make check or money order payable to Elizabeth O'Neill.

Please send check or money order to: Elizabeth O'Neill  
c/o Centralia History Museum  
240 S. Locust St.  
Centralia, IL, 62801

If you have any questions or any other information about your ancestor(s) that is not included on this form please send me a note to the address above or e-mail me at: [ocengen@yahoo.com](mailto:ocengen@yahoo.com).

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_