

## 625 Biglerville Road, Gettysburg, PA 17325 (717) 334-4723 archives@achs-pa.org

## Research Request Form

Name:			
Email:			
Phone:			
Address: _			
		State:	Zip:
	Туре	of Research Reques	st
	Genealogy _	Property Research	Other
		ooking for, including what s you have already consulted	specifically you hope we can l:

## For Genealogical Research Requests

Date
Signature
I understand that if this request is approved, the fee for research is \$30 per hour with a minimum of two hours (\$60 charge) and that there are no guaranteed positive results.
Previous owners and dates of ownership:
Number of stories:
Construction material of building:
Current owner of property and purchase date:
Use of property (residence, barn, school, church, etc.):
Current address of property:
For Property Research Requests
Ancestor's children:
Ancestor's siblings:
Ancestor's parents:
Spouse's name (please use maiden name if possible):
Death date and location:
Marriage date and location:
Birth date and location:
Ancestor's religious affiliation:
Ancestor's occupation(s):
Place(s) of ancestor's residence:
Ancestor's name to research: