

SUPPLEMENTAL SAMPLE FORM This form or any similar family group sheet may be used. When unable to photocopy materials, hand-copy and obtain the librarian's signature on same. Please furnish date, name of library and location as well.

FAMILY RECORD SHEET

NAME _____ Other Marriages _____

Born Date _____ Where _____ Baptized (date/place) _____

Death Date _____ Where _____ Cemetery _____

PARENTS _____ and _____ Maiden Name _____

SPOUSE _____ Other Marriages _____

Born Date _____ Where _____ Baptized (date/place) _____

Death Date _____ Where _____ Cemetery _____

PARENTS _____ and _____ Maiden Name _____

MARRIAGE DATE _____ Where _____ by (Rev./J.P.) _____

Residences _____

Occupation _____ Military Service _____

Miscellany (religion, politics, etc.) _____

Number of Children _____ Surname _____

	<u>Name</u>	<u>Born</u>	<u>Died</u>	<u>Marr. Date</u>	<u>Spouse</u>	<u># of Children</u>
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____	_____