

CQFHA Inc - RESEARCH REQUEST FORM

Your Details

Name

Address.....

Member/Non Member (please indicate).....

Email address

Research Request (One family name per form)

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Your Ancestor's Details

Fill in as much information as possible on the person you want to have researched

Name

Date of Birth.....

Where

Marriage Date

Where When

Death Date.....

Where When

Spouse's Details

Name

Date of Birth.....

Where

Death

Where When

Children

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Specific areas you would like researched (please attach on back if insufficient space)

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A fee of \$15.00 per hour is charged (with a minimum of \$15). Please make cheque or money order to Central Queensland Family History Association Inc. and enclose \$15.00 payment with research request form plus a S.A.E. if you require a reply by "snail mail". If you require an estimate of your costs in advance, please ask.

**Central Queensland Family History Association Inc.
PO Box 6000, Central Queensland Mail Centre, Qld 4702, AUSTRALIA**