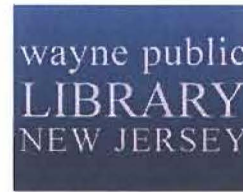


Wayne Public Library
 Reference Department
 461 Valley Road
 Wayne, NJ 07470
 973-694-4272 ext. 5401



Mail-In Genealogy Research Request Form
 Please print and complete this form when requesting research.

Person requesting information:

Name: _____

Full address: _____
(Number, Street, Apt. or Suite #)

(City) (State) (Zip Code)

Telephone number: _____ E-mail: _____

I understand that there will be a research fee of \$10.00 plus 25¢ per photocopy page charge, payable by check to the Wayne Public Library. (Please write "Research" on the memo line.)

Signature: _____ Date: _____ Librarian: _____

Please provide as many details of the individual to be researched:

Name of person you are researching: _____

Date of Birth: _____ Place of Birth: _____

Date of Marriage: _____ Place of Marriage: _____

Date of Death: _____ Place of Death: _____

Father's Name: _____ Mother's Maiden Name: _____

Spouse's Name: _____

Names of Children: _____

Please describe what you want to know about this ancestor, as completely and specifically as possible.

Additional information you feel would be helpful: