

RESEARCH REQUEST FORM

Lancaster Mennonite Historical Society, Research Service, 2215 Millstream Rd., Lancaster, Pa., 17602-1499

Your Name _____ Tel. _____ E-mail _____

Your Address _____ Zip _____

To Be Researched _____ b. _____ d. _____
 (include alternate spellings)

Spouse (if known) _____ Marriage Date _____

Residence (if known) _____
 (Use the other side to provide any additional information that may be relevant)

Date of Event (if applicable) _____

OPTIONAL: Choose and rank sources to search

- Genealogical Card File
- Published Genealogies: _____
- Histories of Lancaster Co., Pa.: _____
- Biographical Annals of Lancaster Co.*
- Census Records
- Cemetery Transcriptions: _____
- Obituaries
- Church Records: _____
- Mennonite/Brethren Encyclopedias
- Lancaster Co. Maps/Atlases: _____
- Pennsylvania Mennonite Heritage* [Quarterly journal of the Lancaster Mennonite Historical Society]
- Lancaster Mennonite Conference Histories

Specify Other Titles Held by the LMHS Library to Be Searched

- Author, Title _____
- Author, Title _____
- Author, Title _____

Other LMHS Sources

- Author, Title _____
- Author, Title _____
- Author, Title _____

Are you a member of the Lancaster Mennonite Historical Society? (Circle One)	A Yes or No
Rate (\$25 per hour for LMHS members; \$35 per hour for non-members)	B
Number of hours of research (minimum of two hours recommended)	C
TOTAL: Multiply Box B x Box C	D

Payment Type (Circle One): Check or Credit Card

Credit Card Type (Circle One): Visa MasterCard Discover Expiration _____

Credit Card Number _____ 3-digit security code from signature area _____

Signature for Credit Card Sales _____