

GENEALOGY RESEARCH SERVICE REQUEST

Before submitting a request, please make sure the Society holds records of the congregation you are researching.

* **Indicates Required Information**

CONGREGATION INFORMATION

Name *

City/Town *

State *

ANCESTOR INFORMATION

Last Name *

First Name *

Last Name
alt. spelling

Middle Initial

Maiden Name

Date of Birth

Date of Death

RECORD TYPE

Baptism, DATE

Marriage, DATE

Membership, DATE

Death, DATE

CONTACT INFORMATION

Last Name *

First Name *

Street Address *

City *

State *

Zip Code *

Phone *

Email *

PAYMENT

Credit Card (Visa, MasterCard, Discover)

Check (payable to Presbyterian Historical Society)

Name on card

Credit Card No.

Expiration Date

3 Digit Security Code

SIGNATURE

I agree to pay the non-refundable fee and to honor all copyright restrictions. Also, I understand that the information supplied to me may not be all that is available.

Sign *

Date *

Send record copies by

Postal Mail

Email



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215.627.1852 | refdesk@history.pcusa.org | www.history.pcusa.org

GENEALOGY RESEARCH SERVICE REQUEST

Please fill out all necessary information on page one of this form.

FEES AND PAYMENT

We charge a fee of \$30.00 for one hour of research (no split hours). The fee includes up to 10 photocopies, 10 PDF scans, or 10 JPG images per request. Payment is required in advance.

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Philadelphia, PA 19147

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