

## REQUEST FOR GENEALOGICAL RESEARCH

Groesbeck Public Library  
601 W. Yeagua  
Groesbeck, Texas 76642

*We are very happy to try to assist you with your genealogical research. Fill out the form below and mail to the above address marked*

**Atten: Genealogy Request** on the outer envelope.

You may also call with requests at **254.729.3667**,

or e-mail: [info@groesbecklibrary.org](mailto:info@groesbecklibrary.org)

*Please print clearly when writing out the information you are requesting. Include names and dates as much as possible, as well as your specific question(s). Be sure to include your name and address, telephone number and email address. **Specific information will produce a more efficient and thorough search.***

**Requested by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Person/Persons you are researching:** \_\_\_\_\_

**What is the specific information you seek about this person or**

**family?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***If you have information about this person/family please fill it in below.***

***Date and place of birth:*** \_\_\_\_\_

***Father's Name:*** \_\_\_\_\_

***Mother's Name:*** \_\_\_\_\_

***Date and place of marriage:*** \_\_\_\_\_

***Name of spouse:*** \_\_\_\_\_

***Children's Name(s), place of birth and date of birth:*** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Date and place of death:*** \_\_\_\_\_

***Any additional information:*** \_\_\_\_\_  
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