



GENEALOGICAL RESEARCH REQUEST FORM

Research Fee

Members-\$40

Non-Members-\$50

Please include your payment when mailing this form to:

Cumberland County Historical Society
21 North Pitt Street
Carlisle, PA 17013
Attn: Genealogical Research Request

DATE : _____

NAME : _____

ADDRESS : _____

PHONE NUMBER : _____

E-MAIL ADDRESS : _____

SURNAME OF FAMILY BEING SEARCHED : _____

BIRTH & DEATH DATES OF INDIVIDUALS : _____

FAMILY'S CONNECTION TO CUMBERLAND COUNTY, PA : _____

SPECIFIC INFORMATION NEEDED : _____

COMMENTS : _____
