

# CQFHA Inc - RESEARCH REQUEST FORM

## ***Your Details***

Name .....

Address.....

Member/Non Member (please indicate).....

Email address .....

Research Request (One family name per form) .....

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## ***Your Ancestor's Details***

Fill in as much information as possible on the person you want to have researched

Name .....

Date of Birth.....

Where .....

Marriage Date .....

Where ..... When .....

Death Date.....

Where ..... When .....

## ***Spouse's Details***

Name .....

Date of Birth.....

Where .....

Death .....

Where ..... When .....

**Children**

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Specific areas you would like researched (please attach on back if insufficient space)

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A fee of \$15.00 per hour is charged (with a minimum of \$15). Please make cheque or money order to Central Queensland Family History Association Inc. and enclose \$15.00 payment with research request form plus a S.A.E. if you require a reply by "snail mail". If you require an estimate of your costs in advance, please ask.

**Central Queensland Family History Association Inc.  
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