|  |  |
| --- | --- |
| **Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | Atchison Library  Kansas Room |

# Research Request Form

## Information

|  |  |  |
| --- | --- | --- |
| **Name:** |  | |
| **Telephone Number:** | | (Home) (Cell) |
| **Address:** |  | |
| **City, State** | Zip Code | |

**E-Mail Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Type of Information Requested:** | | | | | | | | |
|  |  | Birth |  | Death/Obituary |  | Marriage |  | Photographs |
|  |  | Census |  | House/Property |  | Newspaper |  | Other |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Possible Dates (if known):  From: |  |  | To: |  |

|  |
| --- |
| Additional Notes: |
|  |
|  |
| ***\*\*\*Please advise requester that requests are handled on a first come/first serve basis.\*\*\**** |

|  |  |
| --- | --- |
|  |  |
| Staff/Volunteer Signature | Date |

## Researcher Comments

|  |  |  |
| --- | --- | --- |
|  |  | Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  | Completed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| Comments: |
|  |

|  |  |
| --- | --- |
|  |  |
| Researcher Signature | Date Fulfilled |