



Family Group Chart

Family #: _____

FATHERS Surname		Given Name		Confirmed		
Birth Date		Place		<input type="checkbox"/>		
Death Date		Place		<input type="checkbox"/>		
Occupation				<input type="checkbox"/>		
Date Married		Place		<input type="checkbox"/>		
Father						
Surname		Given Name		<input type="checkbox"/>		
Mother						
Maiden Name		Given Name		<input type="checkbox"/>		
MOTHERS Birth Surname		Given Name		Confirmed		
Birth Date		Place		<input type="checkbox"/>		
Death Date		Place		<input type="checkbox"/>		
Occupation				<input type="checkbox"/>		
Father						
Surname		Given Name		<input type="checkbox"/>		
Mother						
Maiden Name		Given Name		<input type="checkbox"/>		
CHILDREN		Birth		Death		Confirmed
Sex	Name	Date	Place	Date	Place	
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
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