## FORTY FORT CEMETERY ASSOCIATION

## Family Research Request Form Donation of \$50.00 per inqury

Checks can be made to: Forty Fort Cemetery Association, 20 River Street, Forty Fort PA 18704

If no records are found your donation can be returned to you upon request.

Thank you for your confidence.

Date:	
Information of the person	making the request
Contact Person	
Address	
Phone Number	
E-mail	
Do you plan to visit the cer	netery, if so when can we expect you?
Information of person bei	ing researched (Use back of sheet if more than one)
Name	
M/D/Y of Death	
Lot Number (If known)	
☐ Family Plot	
☐ Individual Lot	
Any additional information	about the person being researched that we may find useful
Office: Notation of donatio	n, amount, name and address