

FCGSC LINEAGE VERIFICATION REQUEST FORM

PLEASE TYPE OR PRINT CLEARLY. PROVIDE BIRTH/MARRIAGE/DEATH/PARENTS/NAMES OF SPOUSE'S PARENTS FOR EACH PERSON IN YOUR **DIRECT LINE**. BEGIN WITH THE **MOST RECENT** GENERATION AND WORK BACK IN TIME TO THE EARLIEST ANCESTOR. FILL IN AS MUCH INFORMATION AS YOU CAN. IF ACTUAL DATES ARE NOT AVAILABLE, PLEASE INDICATE AN APPROXIMATE DATE OR DATE RANGE.

MOST RECENT GENERATION (YOU OR THE PERSON WHOSE LINEAGE YOU HAVE RESEARCHED)

(1)	Born at	Date
	Died at	Date
Who married (2)	Born at	Date
	Died at	Date
Marriage date	Place	
Parents of (1)		
	NEXT GENERATION	
(1)	Born at	Date
	Died at	Date
Who married (2)	Born at	Date
	Died at	Date
Marriage date	Place_	
Parents of (1)		

Please use the form on reverse to continue for each generation in your lineage

NEXT GENERATION

(1)	Born at	Date
	Died at	Date
Who married (2)		
	Died at	Date
Marriage date	Place	
Parents of (1)		
	NEXT GENERATION	
(1)	Born at	Date
	Died at	Date
Who married (2)	Born at	
	Died at	Date
Marriage date	Place	
Parents of (1)		
	NEXT GENERATION	
(1)	Born at_	Date
	Died at	Date
Who married (2)	Born at	Date
	Died at	Date
Marriage date	Place	
Parents of (1)		
Parents of (2)		