

Research Assistance Form  
Jackson County (MO) Genealogical Society

Your Name	Date	
Street Address		
City	State	Zip Code
Telephone	Email Address	
Information-- full name, date and location--for person(s) being researched:		
Type of records to search (check those that apply):		
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Census	
<input type="checkbox"/> City Directory	<input type="checkbox"/> Death Certificate	
<input type="checkbox"/> Deed	<input type="checkbox"/> Marriage	
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Obituary	
<input type="checkbox"/> Probate or Will	<input type="checkbox"/> Other:	

Please mail this form, including your \$10 research deposit, to the following address: JCGS Research Assistance, P.O. Box 1133, Independence, MO 64051. For more information please contact [Research@jcgs.org](mailto:Research@jcgs.org).