

first_name middle_name last_name #1

Born: when (full date) in place (name and locations of hospital)
 Religion: _____ member of _____
 Brit Mila: when (full date) (or Baptized) (or Christened)
 Bar Mitzvah: when (full date) in (or Bat Mitzvah)
 First Communion: when (full date) in _____
 Confirmation: when (full date) in _____
 Education: _____
 Graduated: _____ from college _____ degree _____
 Occupation: _____
 Resided: _____ at _____
 Retirement: _____ in _____
 Medical condition: _____
 Died: _____ at _____
 Cause of death: _____
 Funeral: _____ in _____
 Buried: _____ in name & location of cemetery
 Interred: _____ in (alternate of buried)
 Cremated: _____ in _____
 Probate: _____ in _____
 Yartzeit: _____ in _____
 Adopted by both: _____ in _____
 Adopted by father: _____ in _____
 Adopted by mother: _____ in _____
 Resided: _____ in _____
 Census: _____ in _____
 Event: _____ in _____
 Emigrated: _____ in _____
 Immigrated: _____ in _____
 Naturalized: _____ in _____
 Hair color: _____
 Eye color: _____
 Description: _____
 Property: _____
 Height: _____
 Weight: _____
 Eye color: _____
 Hair color: _____
 Description: _____
 Father: _____
 Mother: _____

first_name middle_name maiden_name #2

Engaged: _____ in _____
 Married: _____ in _____
 Married (civil): _____ in _____

Married (religious): _____ in _____
 Marriage license: _____ in _____
 Annulled: _____ in _____
 Separated: _____ in _____
 Divorce filed: _____ in _____
 Divorced: _____ in _____
 Event (family): _____ in _____
 Resided (family): _____ in _____

Resided (family): _____ in _____
 Resided (family): _____ in _____
 Not married: _____
 Number of children (family): _____
 No children: _____

Born: _____ same info as spouse
 Graduated: _____ from college _____ degree _____
 No children from this person: _____
 Father: _____
 Mother: _____