

Family Group Record



Prepared By _____ Relationship to Preparer _____

Address _____ Date _____ Ancestral Chart # _____ Family Unit # _____

Husband		Occupation(s)			Religion	
Date —Day, Month, Year		City	County	State or Country		
Born						
Christened					Name of Church	
Married					Name of Church	
Died					Cause of Death	
Buried		Cem/Place			Date Will Written/Proved	
Father		Other Wives				
Mother						

Wife maiden name		Occupation(s)			Religion	
Born						
Christened					Name of Church	
Died					Cause of Death	
Buried		Cem/Place			Date Will Written/Proved	
Father		Other Husbands				
Mother						

*	Sex	Children Given Names	Birth			Birthplace			Date of first marriage/Place	Date of Death/Cause			Computer
	M/F		Day	Month	Year	City	County	St./Ctry.	Name of Spouse	City	County	State/Country	I.D. #
		1											
		2											
		3											
		4											
		5											
		6											
		7											
		8											
		9											
		10											
		11											
		12											