GENEALOGY AND LOCAL HISTORY REQUEST FORM		
YOUR CONTACT INFORMATION		
Name:		
Street address:		
City:	State:	ZIP Code:
E-mail:		Phone:
OBITUARIES REQUESTED (*ALL REQUESTS MUST INCLUDE AT LEAST A MONTH AND YEAR TO SEARCH THE OLEAN NEWSPAPERS)		
Name of Deceased:		Date of Death:
Name of Deceased:		Date of Death:
Name of Deceased:		Date of Death:
Name of Deceased:		Date of Death:
Name of Deceased:		Date of Death:
NON-OBITUARY REQUESTS (ARTICLES, WEDDINGS, ETC.)		
INCLUDE ANY ADDITIONAL INFORMATION THAT MAY BE HELPFUL		
THE MINIMUM FEE IS \$15.00 FOR ONE HOUR OF RESEARCH; YOU WILL BE BILLED \$9.00 FOR EACH ADDITIONAL HOUR OF RESEARCH REQUIRED. RESULTS WILL NOT BE MADE AVAILABLE TO YOU UNTIL PAYMENT IS MADE IN FULL.		
State the Maximum Amount You Are Willing to Pay:		
IF YOU HAVE ANY QUESTIONS REGARDING THE VIABILITY OF YOUR REQUEST OR NEED MORE INFORMATION, PLEASE E-MAIL GENEALOGY@OLEANLIBRARY.ORG		
PRINT THIS COMPLETED FORM AND SEND WITH A \$15.00 CHECK OR MONEY ORDER TO:		

Olean Public Library
134 N. 2<sup>nd</sup> St.
Olean, NY 14760-2583
\*Be sure to include your name with your remittance\*