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	Birth			Birthplace			Date of first marriage/Place	Date of Death/Cause			Computer
	M/F	Given Names	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											