

Family Group Record



Prepared By _____ Relationship to Preparer _____

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

Spouse 1		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 Spouses			
Mother					

Spouse 2			Occupation(s)	Religion
Born				
Christened				Name of Church
Died				Cause of Death
Buried	Cem/Place			Date Will Written/Proved
Father	Other Spouses			
Mother				

	Sex	Children Given Names	Birth	Birthplace			Date of first marriage/Place	Date of Death/Cause			Computer
			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									