

Individual Critical Documents Record Sheet

			Individual Researched
			Family Group or Tree Number
Birth			
Birthdate	Weight/Length	Mother	Father
Location/Hospital	City, State/Prov.	Mother Origin	Father Origin
Given Name			Record Source/Number

Marriage		
Date of Union	Bride Name	Groom Name
Location	Bride Age	Groom Age
Witnesses or Participants	Record Source/Number	

Death			
Date of Death	Duration of Illness	Cause	Location
Mother Name	Father Name	Occupation	Residence/Address of Dec.
Informant(s) / Other Names Listed		Record Source/Number and other information	

Notes: