NEWSPAPER MICROFILM REQUEST FORM

Cost is $3 per request.

NAME	ADDRESS OR EMAIL ADDRESS	REQUEST (I.E., OBITUARY WITH NAME, ARTICLE TITLE, SUBJECT	NEWSPAPER(S)	APPROX. DATE OF ARTICLE	DELIVERY	PAID-
					MAIL/ EMAIL	YES/ NO
					MAIL/ EMAIL	YES/ NO
					MAIL/ EMAIL	YES/ NO
					MAIL/ EMAIL	YES/ NO
					MAIL/ EMAIL	YES/ NO
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					MAIL/ EMAIL	YES/ NO
					MAIL/ EMAIL	YES/ NO