FAMILY GROUP SHEET



HUSBAI	ND:			Occupation(s):						Religion:	
Date - Day, Month, Year		City		Province/State		Country					
Born:											
Baptized:										Name of Church:	
Married:										Name of Church:	
Died:										Cause of Death:	
Buried:										Date Will and Notary:	
Father:			Other Wives:								
Mother:											
WIFE: Maiden Name				Occupation(s):						Religion:	
Born:											
Baptized:										Name of Church:	
Died:										Cause of Death:	
Buried:										Date Will and Notary:	
Father:				Other Husbands:							
Mother:											
Sex		Children		Birth		Birthplace			Date of Marriage/Place		Date of Date
M/F		Given Names	Da	y Month Year City			Province/State Count		Na	Name of Spouse Cause	