

RESEARCH REQUEST

HISTORICAL RESEARCH ROOM

NAME _____ DATE _____

STREET ADDRESS _____ APT. _____

CITY _____ STATE _____ ZIP CODE _____

EMAIL ADDRESS _____

PHONE NUMBER _____ Amount Enclosed \$ _____

1. OBITUARY SEARCH IN DAILY NEWS JOURNAL (1931-PRESENT)

a. Name of Deceased _____

b. Date of Death _____

2. NEWSPAPER ARTICLE SEARCH

a. Subject of article _____

b. Date of event _____

3. ANCESTOR RESEARCH

a. Ancestor's name _____

b. Trying to find:

4. OTHER RESEARCH:

The research fee for each name (or inquiry) is \$5.00 which includes postage and up to five copies. Additional pages are 10¢ per page for a photocopy and 25¢ per microfilm copy. Payment of the research fee should accompany this request. Charges will apply regardless of the outcome of the search. You will be notified of any additional charges. Please make checks payable to **Linebaugh Public Library**. Send your request to:

Linebaugh Public Library
Historical Research Room
105 West Vine Street
Murfreesboro, TN 37130