

**NATIONAL SOCIETY UNITED STATES DAUGHTERS OF 1812**  
**MEMORIAL LIBRARY**  
**INFORMATION REQUEST FORM**  
**LIBRARIAN NATIONAL**

Ora Jane Johnson  
 2680 Poinsettia Drive, Richardson, TX 75082-4248  
 Telephone or Text: (214) 616-9679 Email: [usd1812librarian@gmail.com](mailto:usd1812librarian@gmail.com)

***Complete and email this form to the Librarian National.*** Do not send payment at the time of the request. You will be contacted with the amount, or estimated amount, that is due. Once we complete the research and receive your payment, the copies will be mailed to you. If you do not have access to email, you may optionally mail it to the address listed above.

**FEE STRUCTURE:**

<b>Service</b>	<b>Fee</b>
Copy of an approved application or supplemental application (for personal use only).	\$10 per application
Copy of an ancestor file	\$10 for first 20 pages plus \$.50 for each additional page per file
Up to 20 pages copied from library collection material	\$10 for first 20 pages plus \$.50 for each additional page

**DATE:** \_\_\_\_\_ **--INFORMATION REQUESTED** (Please be specific. Provide member number and name, if known. Provide Ancestor name, rank, and state of service, if known): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REQUESTOR INFORMATION:**

Requestor Name: \_\_\_\_\_  
 Are you a U.S.D.1812 member? \_\_\_ y/n If yes, give Chapter and State: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**DO NOT SEND PAYMENT AT THIS TIME.** Please wait until you are contacted by the Librarian National. ***After*** you are contacted by the Librarian, mail your check made out to:

**Treasurer National, U.S.D. 1812**

in the amount due to the Librarian's home address given above. Include a copy of the original request or email from the Librarian so that the check can be matched to the request.

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**INFORMATION PROVIDED:**

Research Notes:

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