

Siskiyou County Museum

RESEARCH LIBRARY

910 South Main Street

Yreka, CA 96097

(530) 842-3836

DATE: _____

Call-In Request _____

Walk-In Request _____

Appointment Date _____

Staff Researcher _____

Date Completed _____

Historical Research Request Form

Please type or clearly print the information on this form. Staff will conduct a quick research of the requested items and provide them to you if you are present, call or email our list of findings.

If you would like us to do more than a preliminary search, **we ask that you make a donation for our time and effort.** Scans, photocopies, CDs, and images may incur an additional cost (please refer to the Photo Permission Policy). To save the cost of a CD (\$5.00), we recommend you provide a thumb-drive to upload any images and/or documents.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail _____

Phone: _____

Subject to be
Researched _____

Exactly what information are you looking for? Include Names (first, last, middle, maiden, etc.), Dates (birth, death, marriage), Siblings, Burial, Place of Birth, Location of Interest, etc.

See back of page for Research Results and more information

Researcher Contacted: Phoned _____ Emailed _____ Postal Mail _____

Info Provided:

