Genealogy Records/Document Request		
Please submit written request to:		
Augusta-Richmond County Public Library Georgia Heritage Room 823 Telfair Street Augusta, Georgia 30901	or	Email: genealogy@arcpls.org
Please complete this form to request a document:		
Your Name:		
Address:		
(City)	(State)	(Zip)
Telephone Number:		
Email:		
I understand there will be a fee for reference documents are located. Copy fees also apply associated fees. Please view the more detail "About the Georgia Heritage Room" tab on	y. Library stai led explanati	ff will notify me about results and on of fees under the "Services" section of
Signature:		Date:
If necessary, please print and include as much detail as possible.		
Name of person you are researching:		
Type of document:		
(obituary, news article, other)		
Date of Birth:	Place of Birtl	h:
Date of Marriage:	Place of Ma	rriage:
Name of Spouse:		
Date of Death:	Place of	f Death:
Father's Name:	Mother's Name (Maiden)	
Please provide additional information or supporting documents you think might be helpful:		