

Texas Division Business Office  
United Daughters of the Confederacy  
Fort Worth, Texas  
RESEARCH REQUEST

Date \_\_\_\_\_

Name: \_\_\_\_\_

Institution Affiliation (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_ Zip Code \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Ancestor Name: \_\_\_\_\_

Company \_\_\_\_\_ Regiment \_\_\_\_\_

Infantry \_\_\_ Artillery \_\_\_ Cavalry \_\_\_ Navy \_\_\_ Unknown \_\_\_

Other \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place \_\_\_\_\_

Date of Death \_\_\_\_\_ Place \_\_\_\_\_

Affiliated member's names (please include all names by which this person may have been known, including maiden, previous marriages, spouse's name, nicknames, etc.)

\_\_\_\_\_  
\_\_\_\_\_

UDC Chapter Name: \_\_\_\_\_

UDC Chapter City: \_\_\_\_\_

Reason for Request:

Genealogy

Assist with membership application

Other \_\_\_\_\_

Please be as specific and complete as possible if this inquiry is not related to a specific veteran.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please submit this form to the Texas Division UDC Business Office

c/o Diane Dyess, Custodian

PO Box 163824

Fort Worth TX 76161-3824

dabransom@sbcglobal.net