**TABLE OF CHANGES – FORM**

 **Form** **G-1041,**

 **Genealogy Index Search Request**

**OMB Number: 1615-0096**

**03/15/2016**

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| **Reason for Revision:** Incorporating standard language updates and formatting changes.  |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1** |  **START HERE** - **Type or print in black ink and read all instructions before completing this form.** | [Page 1]**START HERE** - **Type or print in black ink.** |
| **Page 1,****Part I. Information About You** | **Part I. Information About You****Full Name** Salutation: Mr. Mrs. Ms.Last Name First NameMiddle NameSuffix (Jr., Sr.)Address (Number and Street Name, (P.O. Box Number or Route Number))Apartment No.CityState/ProvinceCountry *(if other than U.S.)*Zip/Postal CodeE-Mail Address: *(if available)*Daytime Telephone Number: *(include Area/Country Code, ext.*Would you prefer to receive your search results via e-mail or postal mail? E-mail/Postal mail | [Page 1]**Part 1. Information About You** (Requestor)***Requestor’s Full Name*** [Sub-header]**1.a.** Family Name (Last Name)**1.b.** Given Name (First Name)**1.c.** Middle Name***Requestor’s Mailing Address*** [Sub-header]**2.a.** In Care of Name (if any)**2.b.** Street Number and Name**2.c.** Apt./Ste./Flr. [Fillable Field]**2.d.** City or Town**2.e.** State**2.f.** ZIP Code**2.g.** Province**2.h.** Postal Code**2.i.** Country***Requestor’s Contact Information*[Sub-header]****3.** Requestor’s Daytime Telephone Number**4.** Requestor’s Mobile Telephone Number (if any)**5.** Requestor’s Email Address (if any)[Deleted]***Requestor’s Certification*** [Sub-header]By my signature, I consent to pay all costs incurred for search, duplication, and review of documents up to **$20**. (See Form G-1041 Instructions for more information.)**6.a.** Requestor’s Signature**6.b.** Date of Signature (mm/dd/yyyy) |
| **Page 1,****Part II. Information Needed to Search the Index** | **Part II. Information Needed to Search the Index****A. Required Information****Immigrant's Full Name** (If appropriate, enter religious salutation before the first name - Example: father, sister, etc.)Last Name First NameMiddle NameOther names used, maiden names, aliases, or variant spellings *(if any)* **\*Immigrant's Date of Birth** *(Check only one)***: Actual/Estimated Day/Month/Full Year****Immigrant's Country of Birth**(Include Country, Province, Town/Village, if known) | [Page 1 ]**Part 2. Immigrant’s** **Information**[Deleted]***Full Name of the Immigrant*** [Sub-header]1.a. Family Name (Last Name)1.b. Given Name (First Name)1.c. Middle Name***Other Names Used by the Immigrant*** [Sub-header]List all other names the immigrant has ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 4. Additional Information**.**2.a.** Family Name (Last Name)**2.b.** Given Name (First Name)**2.c.** Middle Name[Page 2]***Other Information About the Immigrant*** [Sub-header]**3.a.**  Date of Birth (mm/dd/yyyy)**3.b.** Is this date actual or estimated? [] Actual [] Estimated**Place of Birth** (Include Town or Village, Province, and Country, if known)**4.a.** Town or Village [Fillable Field]**4.b.** Province [Fillable Field]**4.c.** Country [Fillable Field] |
| **Page 1,****B. Additional Information Useful to Identify a Given Immigrant From Others With the Same Name** | **B. Additional Information Useful to Identify a Given Immigrant From Others With the Same Name****Date of immigrant's exact arrival in the United States:****(mm/dd/yyyy)****(If unsure or unknown of date range, check additional choices below)**Before 19061906 to 19241924 to 1940After 1940**Where did the immigrant live in the United States?** (State, city, or exact street address-Example: in Pennsylvania until 1938, then lived in Madison,Wisconsin)Other information about the immigrant that may prove useful in the index search (name of spouse and/or children, date of immigrant's death, military service, date of naturalization, date of female immigrant's marriage, occupation):**\* Important:** If the immigrant's date of birth is **less than** 100 years prior to the date of this request, you must attach documentary proof of death to the request form. Do not attach original records because we will **not** return them. See instructions on **Page 1** for examples of acceptable documentary proof of death.**NOTE:** The fee for an Index Search Request is **$20**. | [Page 2]**Part 3. Other Information** **1.** Date of immigrant's exact arrival in the United States.(mm/dd/yyyy)**NOTE:** If you are unsure of the date range, or it is unknown select an additional choice in **Item Numbers 2.a.** – **2.d.****2.a.** Before 1906**2.b.** 1906 to 1924**2.c.** 1924 to 1940**2.d.** After 1940**Where did the immigrant live in the United States?****3.a.** Street Number and Name**3.b.** Apt./Ste./Flr. [Fillable Field]**3.c.** City or Town**3.d.** State**3.e.** ZIP Code**3.f.** Postal Code**3.g.** Country**4.a.** Date From (mm/dd/yyyy)**4.b.** Date To (mm/dd/yyyy)**5.** List additional information about residences and dates below (if any).**6.** Other information about the immigrant that may prove useful in the index search (For example, name of spouse and/or children, date of immigrant's death, military service, date of naturalization, date of female immigrant's marriage, occupation): [Fillable field] **Important:** If the immigrant's date of birth is **less than** 100 years prior to the date of this request, you must attach documentary proof of death to this request. Do not attach original records because we will **not** return them. See the **What Information Is Required to Begin an Index Search** section of the Instructions for examples of acceptable documentary proof of death.[Deleted] |
| **[New]** |  | [Page 3]**Part 4. Additional Information**If you need extra space to provide any additional information within this request, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with your request or attach a separate sheet of paper. **1.a.** Family Name (Last Name) **1.b.** Given Name (First Name) **1.c.** Middle Name **2.a.** Page Number**2.b.** Part Number**2.c.** Item Number**2.d.** [Fillable field]**3.a.** Page Number**3.b.** Part Number**3.c.** Item Number**3.d.** [Fillable field]**4.a.** Page Number**4.b.** Part Number**4.c.** Item Number**4.d.** [Fillable field]**5.a.** Page Number**5.b.** Part Number**5.c.** Item Number**5.d.** [Fillable field]**6.a.** Page Number**6.b.** Part Number**6.c.** Item Number**6.d.** [Fillable field] |