**TABLE OF CHANGES –FORM**

**Form G-1041, Genealogy Index Search Request**

**OMB Number: 1615-0096**

**06/02/2020**

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| **Reason for Revision: Fee Rule****Project Phase: OMB Review**Legend for Proposed Text:* Black font = Current text
* Red font = Changes

Expires 09/30/2022Edition Date 09/17/2019 |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1****Part 1. Information About You** (Requestor) | **[Page 1]****…****2.a.** In Care Of Name (if any)**2.b.** Street Number and Name**2.c.** Apt./Ste./Flr. Number**2.d.** City or Town**2.e.** State**2.f.** ZIP Code**2.g.** Province**2.h.** Postal Code**2.i.** Country**…****4.** Requestor's Mobile Telephone Number (if any)**5.** Requestor's Email Address (if any)**…**By my signature, I consent to pay all costs incurred for search, duplication, and review of documents up to **$65.** (See Form G-1041 Instructions for more information.)**…** | **[Page 1]****…****2.a.** In Care Of Name **2.b.** Street Number and Name**2.c.** Apt./Ste./Flr. Number**2.d.** City or Town**2.e.** State**2.f.** ZIP Code**2.g.** Province**2.h.** Postal Code**2.i.** Country**…****4.** Requestor's Mobile Telephone Number **5.** Requestor's Email Address **…**By my signature, I consent to pay all costs incurred for search, duplication, and review of documents up to **$170.** (See Form G-1041 Instructions for more information.)**…** |
| **Page 2,****Part 3. Other Information** | **[Page 2]****…****5.** List additional information about residences and dates below (if any).**…** | **[Page 2]****…****5.** List additional information about residences and dates below.**…** |