TABLE OF CHANGES – FORM
Form G-1041, Genealogy Index Search Request
OMB Number: 1615-0096
06/02/2026

Reason for Revision: GenealogyNPRM

Legend for Proposed Text:
- Black font = Current text
- Red font = Changes

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Future Edition Date xx/xx/2026

Current Page Number and Section	Current Text	Proposed Text
Page 1, **Part 1. Information About You** (Requestor)	**[Page 1]** **START HERE - Type or print in black ink.** **Part 1. Information About You** (Requestor) ***Requestor's Full Name*** **1.a.** Family Name (Last Name) **1.b.** Given Name (First Name) **1.c.** Middle Name (if applicable) ***Requestor's Mailing Address*** **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 ***Requestor's Contact Information*** **3.** Requestor's Daytime Telephone Number **4.** Requestor's Mobile Telephone Number (if any) **5.** Requestor's Email Address (if any) [new]	**START HERE - Type or print in black ink.** [no change] **6. *Method of Delivery of Records*** *(select only one)**:*** [ ] Electronically to my Email Address listed in **Item Number 5.** [ ] Mail to my Mailing Address listed in **Item Number 2.**

	Requestor's Certification By my signature, I consent to pay all costs incurred for search, duplication, and review of documents up to **$80**. (See Form G-1041 Instructions for more information.) **6.a.** Requestor's Signature **6.b.** Date of Signature (mm/dd/yyyy)	***Requestor's Certification*** [no change] **7.a.** Requestor's Signature **7.b.** Date of Signature (mm/dd/yyyy)
Pages 1-2, **Part 2. Immigrant's Information**	**[Page 1]** **Part 2. Immigrant's Information** ***Full Name of the Immigrant*** **1.a.** Family Name (Last Name) **1.b.** Given Name (First Name) **1.c.** Middle Name (if applicable) ***Other Names Used by the Immigrant*** 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 (if applicable) **[Page 2]** ***Other Information About the Immigrant*** **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 **4.b.** Province **4.c.** Country	[no change]
Page 2, **Part 3. Other Information**	**[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	[no change]

	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. Number **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). [fillable field] **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. [new]	**Important:** Historical records that have reached their retention date are eligible for permanent transfer to National Archives and Records Administration (NARA). Transferred records can be requested from NARA at **archives.gov**. Please refer to the USCIS Genealogy Program webpage at **genealogy.uscis.dhs.gov** for the latest information regarding which records have been transferred.
Page 3, **Part 4. Additional Information**	**[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.	[new]

	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]	