



Contract for Payment of Research Fees

I hereby authorize OCHS to spend up to ____ hours conducting research on my behalf at the hourly fees of \$5 for OCHS members and \$10 for non-members.

Name (printed): _____ Signature: _____

Address: _____

Daytime phone: _____ Date of request: _____

POCHS member? Yes No

I understand that OCHS cannot guarantee its research will yield the information that I design and that payment is due for the amount of time spent, regardless of the results obtained.

Please answer the following questions to help guide our research:

1. What information are you seeking? Please include as much relevant information as you can and be as specific as possible regarding names, dates, geographic locations, etc. Use the reverse if necessary.

2. What other resources have you explored?

- ☐ Appleton Public Library's Online Collections (website)?
- ☐ Google books (website)?
- ☐ Newspaper Archive (website)?
- ☐ Wisconsin Historical Society's Online Collections (website)?
- ☐ Fox Valley Genealogical Society?
- ☐ Recollection Wisconsin (website)?
- ☐ Area Research Center at University of Wisconsin Green Bay?
- ☐ Lawrence University Archives?
- ☐ Fox Valley Memory (website)?
- ☐ Published sources? If so, please list relevant sources:

3. May we share your name and address with others pursuing related research?

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Appleton, WI 54911
(920) 735-9370
myhistorymuseum.org