Project Pioneer Family Group Record

Family Name SUBMITTERS NAME ADDRESS AND PHONE # AND/OR EMAIL ADDRESS TO CHECK INFORMATION						Instructions: Fill out completely. Birth date, marriage and death dates are important. Use numbers for day and year, spell out months, include your address, phone number and or email address so any inconsistencies can be checked. When children listed on this page have their own children, please use a separate sheet to list their family. Send to Barbara Baster, 2985. Gabourist. Genevieve, MO 63670			
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Event Month Day Year Place of Event (City, County, State or Country) Birth Marriage Death					Lineage: As far back as you know. We need this to link you with the family.				
Notes					Great-great-great grandparents				
His Ot	her Spouse (s)								
His Fa	ther	H	His Mother (Maiden Name)		Great-great	-great gra	ndparents		
Wife Full Maiden Name					Great-great Grandparents				
Event Birth	Month Day Year	Place Of Event (City	y, County, State, or Country)		Great-great	Grandpa	CHE		
Death									
Notes					Great-Gran	dparents			
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Her Other Spouse(s) Her Father Her Mother (Maiden Name)					Grandparents				
Sex M/F	Children Given Name	Birth Month Day Year	Birthplace City, County, State		f first marriag of Spouse	e/Place	Date of Death City, State	Children #	
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