

**COVER SHEET FOR A SCANNED IMAGE OF A DOCUMENT**

(Use if document cannot easily be scanned and converted to Microsoft Word.)

**Name of Person Submitting this Information:** \_\_\_\_\_

**Name of Ancestor or Descendant to Whom this Document Relates:** Full Name: (*First, Middle, Last. Omit Sr., Jr. etc.*)

\_\_\_\_\_

**Type of Document:** (*indicate with an X or a checkmark one of the following*):

Letter \_\_\_\_\_

Memo \_\_\_\_\_

Will or Trust \_\_\_\_\_

Newspaper Article \_\_\_\_\_

Other (*specify what it is*) \_\_\_\_\_

\_\_\_\_\_

**Author of Document** (*if different from ancestor or descendant*): Full Name: (*First, Middle, Last, Omit Sr., Jr. etc.*)

\_\_\_\_\_

**Date of this Document:** (*day, month, year*) \_\_\_\_\_

*State whether date is exact, estimated or unknown:*

\_\_\_\_\_

**Person, if any, to Whom Document is Addressed:**

\_\_\_\_\_

**Brief Comments about the Document:**

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