

## **G**EN-**F**IND RESEARCH ASSOCIATES, INC.

## **LETTER OF AUTHORIZATION**

**(By Personal Family History Client)** 

Duly	dated	and	effective	this	date	of						20,	, I,
												address	of
									;	authoriz	e GEN-FI	ND Resea	arch
searc	h and e	xtractio	on of any a	and all	record	ls tha	anada) and it it institution y noted belo	s and	_				
FIND		reques	t on such re	_	_		e the approp						
For se	earching	purpo	oses, my fai	nily m	embers	s' nar	nes are:						
			sonal ident request!	ificatio	on is e	nclos	ed with this	auth	orizat	tion. W	e thank	you for y	<b>your</b>
Cordi	ally you	rs,				-						(signe	:d)
Name	of Clier	nt:				_						(pri	nt)
Addre	ess of Pe	titione	er:			_							

Tel: 1-877-390-1766