

CONFEDERATE VETERAN SEARCH

www.locateconfederateforebears.com

Peggy Fox Confederate Consultant

PRINT NAME AND ADDRESS IN SPACE BELOW

DATE

Phone/Email/Optional

Name of Confederate Veteran: _____

Name / Number of Military Unit: _____

Birth State / Birth Date: _____

Living (State / County) 1860-1861: _____

Death Date / State / County / City: _____

Widow's Name / State / County / Death Date: _____

What Information Are You Seeking? _____

If information listed above is not known -- send known information.

Please list official documents in possession to ensure no duplication of material.

Research fee \$30 per person. Duplication of form allowed. 2-6 weeks response.

Email or Mail form and Mail fee to address shown.

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