

# Family Questionnaire

I am researching the Straw family and any families that have touched the Straw family along the way. The data I have collected includes data back to the mid 1600s. I would very much appreciate as much information as you can provide to me about your family. Of course, returning this form is not mandatory, but it would certainly help me in my research, and I would appreciate it very much.

Please return this form with as much of the information as you know to: Jim Straw, PO Box 67247, Scotts Valley, CA 95067-7247.

Husband's Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Place: \_\_\_\_\_

Christening Date: \_\_\_\_\_ Place: \_\_\_\_\_

Death Date: \_\_\_\_\_ Place: \_\_\_\_\_

Burial Date: \_\_\_\_\_ Place: \_\_\_\_\_

Husband's Father's Name: \_\_\_\_\_

Husband's Mother's Name: \_\_\_\_\_

Husband's Paternal Grandfather's Name: \_\_\_\_\_

Husband's Paternal Grandmother's Name: \_\_\_\_\_

Husband's Maternal Grandfather's Name: \_\_\_\_\_

Husband's Maternal Grandmother's Name: \_\_\_\_\_

Wife's Name (maiden name): \_\_\_\_\_

Birth Date: \_\_\_\_\_ Place: \_\_\_\_\_

Christening Date: \_\_\_\_\_ Place: \_\_\_\_\_

Death Date: \_\_\_\_\_ Place: \_\_\_\_\_

Burial Date: \_\_\_\_\_ Place: \_\_\_\_\_

Wife's Father's Name: \_\_\_\_\_

Wife's Mother's Name: \_\_\_\_\_

Wife's Paternal Grandfather's Name: \_\_\_\_\_

Wife's Paternal Grandmother's Name: \_\_\_\_\_

Wife's Maternal Grandfather's Name: \_\_\_\_\_

Wife's Maternal Grandmother's Name: \_\_\_\_\_

Marriage Date: \_\_\_\_\_ Place: \_\_\_\_\_

# Family Questionnaire

1. Name: (Male / Female): \_\_\_\_\_

Birth Date: \_\_\_\_\_ Place: \_\_\_\_\_

Christening Date: \_\_\_\_\_ Place: \_\_\_\_\_

Death Date: \_\_\_\_\_ Place: \_\_\_\_\_

Burial Date: \_\_\_\_\_ Place: \_\_\_\_\_

Spouse (maiden name): \_\_\_\_\_

2. Name: (Male / Female): \_\_\_\_\_

Birth Date: \_\_\_\_\_ Place: \_\_\_\_\_

Christening Date: \_\_\_\_\_ Place: \_\_\_\_\_

Death Date: \_\_\_\_\_ Place: \_\_\_\_\_

Burial Date: \_\_\_\_\_ Place: \_\_\_\_\_

Spouse (maiden name): \_\_\_\_\_

3. Name: (Male / Female): \_\_\_\_\_

Birth Date: \_\_\_\_\_ Place: \_\_\_\_\_

Christening Date: \_\_\_\_\_ Place: \_\_\_\_\_

Death Date: \_\_\_\_\_ Place: \_\_\_\_\_

Burial Date: \_\_\_\_\_ Place: \_\_\_\_\_

Spouse (maiden name): \_\_\_\_\_

Other Information: \_\_\_\_\_

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My primary purpose for these forms is to document the details of our families. If you have any more information than that requested above, I would dearly love to have it. Or, if you have any pictures, certificates, old documents, etc. from the past, I would very much like to get a copy of them. Please do not send one-of-a-kind documents that cannot be replaced if lost. In some cases, I can meet with you and scan the documents directly into the computer. Any other history you can include will enrich the family history of our ancestors.

Thank you very much for your time.