



**ROGUE VALLEY
GENEALOGICAL SOCIETY**
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Obituary Request Form

(979.527 V381)

Your Name _____

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E-Mail address _____ Phone Number _____

Name of Person(s) for Whom Information Is Sought _____

Year (s) _____ Vol _____ Page(s) _____

Please include a check made payable to RVGS for \$10.00 and a self-addressed, stamped envelope. Mail to the address on this form.

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