

Date _____

RESEARCH REQUEST FORM

Subject: _____

Specific Questions: _____

Note: Please give exact street address if you are researching a particular building.

Please check the collections you would like to have searched. Searches of multiple collections will require higher research fees.

_____ Photograph Collection. (If you wish to order photos, please fill out this form and also the accompanying Photo Order Data Form. Reproduction fees and policies are listed on the museum's website under "Research")

_____ Maps and Directories

_____ Reports, Books & Newspaper Clippings

_____ Manuscript Collection (unpublished family & organizational records)

Name _____ Phone _____

Organization _____ Email _____

Address _____

City _____ State _____ Zip _____

Your request will be researched on a time available basis in the order requests are received. You will be notified once the material has been identified and the fee assessed. Appointments are scheduled in advance.

For further information call the museum archives at (541) 682-4242 or email research@lchm.org.

Official Use Only

Assessed Fee _____

Appt. Date _____

Staff _____

Appt. Time _____