



Family Group Sheet

Prepared By _____ Relationship to Preparer _____

Address _____ Date _____ Ancestral Chart # _____ Family Unit # _____

Husband		Occupation(s)			Religion	
Date—Day, Month, Year		City	County	State or Country		
Born						
Christened					Name of Church	
Married					Name of Church	
Died					Cause of Death	
Buried		Cem/Place			Date Will Written/Proved	
Father		Other Wives				
Mother						

Wife		Occupation(s)			Religion	
Date—Day, Month, Year		City	County	State or Country		
Born						
Christened					Name of Church	
Died					Cause of Death	
Buried		Cem/Place			Date Will Written/Proved	
Father		Other Husbands				
Mother						

*	Sex M/F	Children Given Names	Birth	Birthplace	Date of first marriage/Place	Date of Death/Cause	Computer I.D. #
			Day Month Year	City County St./Ctry.	Name of Spouse	City County St./Ctry.	
		1					
		2					
		3					
		4					
		5					
		6					
		7					
		8					
		9					
		10					
		11					
		12					

Note:*=Direct Ancestor

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