

**CONFEDERATE ANCESTOR RESEARCH FORM**

CSA Ancestor's Full Name: \_\_\_\_\_

Company & Regiment: \_\_\_\_\_ State enlisted: \_\_\_\_\_

Please circle: Artillery Cavalry Infantry Other: \_\_\_\_\_

**Requirements for Researching Pension Records**

Town: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Spouse's name: \_\_\_\_\_

**Research Options**

**Military Service Record Only.**

National Archives microfilm and compiled Confederate Services Record. Rarely is any genealogical information found on military records.

- |  | <b>Fees</b> |
|--|-------------|
| <input type="checkbox"/> Member/Prospective Member | \$15.00     |
| <input type="checkbox"/> Non-member                | \$25.00     |

**Pension Record.** Only available from the Business Office for the following states: Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Missouri, South Carolina and Tennessee. Please do not request pensions for states not listed above.

- |  |         |
|--|---------|
| <input type="checkbox"/> Member/Prospective Member | \$15.00 |
| <input type="checkbox"/> Non-member                | \$25.00 |

**Combination Research.** Includes both Confederate Military Service Record and Pension Record. Only for the states listed above.

- |  |         |
|--|---------|
| <input type="checkbox"/> Member/Prospective Member | \$25.00 |
| <input type="checkbox"/> Non-member                | \$35.00 |

**Condensed Service Record Card** no S&H required (can be used as proof of Confederate Military Service)

- |                          |        |
|--------------------------|--------|
| <input type="checkbox"/> | \$8.00 |
|--------------------------|--------|

Subtotal \$ \_\_\_\_\_

Shipping & handling **\$6.00**

Total enclosed \$ \_\_\_\_\_

**"PROSPECTIVE MEMBER" RATES ARE EXTENDED ONLY TO PERSONS WHO HAVE BEEN INVITED TO JOIN A SPECIFIC CHAPTER**

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Chapter name & number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Please make check payable to "Treasurer General, UDC" and mail to:

**UDC Business Office  
328 North Boulevard  
Richmond, VA. 23220**

If you prefer to use a credit card, please complete the following:

Type of card: \_\_\_\_\_ Credit card # \_\_\_\_\_

Expiration: \_\_\_\_\_ Signature: \_\_\_\_\_