

Rudolph Robert Fischer Genealogy Update Form



Each adult descendant of Rudolph Robert Fischer is requested to complete an individual form.

Full Name _____

Gender: ☐ Male ☐ Female Nickname: _____ Living: ☐ Yes ☐ No

Address _____

Phone _____

Email _____

Please Provide Date and Place for the following:

Birth: _____

Christening: _____

Death: _____

Burial: _____

Please provide Full Name, Birthdate and Location for each of the following:

Parents: _____

Spouse / Partner: _____

Children: _____

Extra Notes: (Veteran information, Occupation, Interests) Please use back of form if additional space is needed.