**Obituary Request Form**

**Non-residents will be charged a $5.00 fee for each obituary requested.** Once you have located the obituary, fill out the form below. Please fill out a separate form for each obituary requested.

|  |
| --- |
| **Your Information** |
| **Name** |  |
| **Address**(Only if you would like a copy mailed to you) |  |
| **Email Address**(Only if you would like a copy emailed to you) |  |
| **Information From Obituary Index** |
| **Last Name** |  |
| **First Name** |  |
| **Publication Date** |  |
| **Publication** |  |
| **Page Number** |  |
| **Year** |  |
| **Date of Death** |  |
| **Notes** |  |
| **Microfilm Reel** |  |

Please make check payable to Glen Cove Public Library and mail to:

Ellen Quasha

Glen Cove Public Library

4 Glen Cove Avenue

Glen Cove, NY 11542

If you have any questions, please call Ellen Quasha (516)676-2130 ext. 143

or email Ellen@glencovelibrary.org