

Date:	
Submitted by:	
Address:	
City/State/Zip:	
Talanhana:	Email

BIOGRAPHY PAGE

Help our efforts to keep track of the family by filling out and mailing in a biography sheet for each person in your family. Any copies of records supporting this information are welcome, e.g., certificates of birth, marriage, death, etc. Also, we welcome photos of all members and ancestors for our archive. Please give names of subjects in photos on back of same.

Studebaker Immigra	nt Ancestor (circle one)	Peter	Clement	Heinric	h Don't Kno	w Not Applicable
Subject's Data: Male	Female Members	hip ID#	S	SFNA Ge	nealogy No	
First	Middle MaidenLast					
Nickname(s)		Religious	Affiliation_			
Birth Date: Day M	onthYear	Facili	ty			
Birth Place: City	County		_State/Prov	V	Cou	intry
Death (if applicable): Day	Month	Year	Cause_			
Burial (if applicable): Facilit	y Coun	ty	S	tate/Prov	Co	untry
Occupation(s)					Retired?_	Year?
High School:	City			St	tate Ye	ar Graduated
College/University (1)		State _	Yr.C	Grad	Degree	
College/University (2)		State	Yr.G	rad	Degree	
College/University (3)		State	Yr.C	Grad	Degree	
Military Service: Branch _		Rank		War	/Conflict/Dates_	
Medals/Honors Awarded _						
Hobbies/Special Interests						
Special Awards/Achievement	ents					
Subject's Father:	Studebaker descendar	nt? Ye	s No	Don't	know	
Name: First	Middle			La	ast	
Born: Date (day/month/year	r) Place: _					
Subject's Mother:	Studebaker descendar	nt? Ye	s No	Don't	Know	
Name: First	Middle		Maic	len		
Born: Date (day/month/year	r) Place:					

Please duplicate this page as necessary for multiple marriages of subject.

Subject's Name	SFNA Genealogy No Date:
(from page 1) Subject's Spouse (please circle pertinent no. & gender)	1^{st} 2^{nd} 3^{rd} 4^{th} Male Female
Date of Marriage: Day Month Year	Facility
Place of Marriage: CityCounty	St/ProvCountry
Name: First Middle N	MaidenLast
Birth Date: Day MonthYear	Facility
Birth Place: City County	St/Prov Country
Death / Divorce (if applicable circle one) Date (day/month/year	r) Place
Spouse's Father's Name: First Middle_	Last
Spouse's Mother's Name: First Middle_	Maiden
biological parents of a child listed below, please provide addisection also to give the date and place of childhood or young: 1. Full Name: 2. Full Name: 3. Full Name: 4. Full Name: 5. Full Name: 6. Full Name:	often unclear. If both the above subject and spouse are not the ional data / clarification on the lines provided below. Use this adult deaths. Remember to reference line numbers. (day/month/year) Male Female Birth Date:/ Male Female Birth Date:/
8. Full Name:	Male Female Birth Date://
Additional Data / Clarification / Favorite Famil	y Story (continue on additional page if necessary)