

LaDonna Garner, CGSM

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Agreement for Genealogical Research Services.

I authorize LaDonna Garner, Certified GenealogistSM, to provide research assistance by researching only authorized services requested below. I understand this is not a guarantee that the request can be located and she will conduct my research according to the Code of Ethics adopted by the Board for Certification of Genealogists® <<http://www.bgc certification.org/aboutbcg/code.html>>.

Upon completion of services, I will receive a detailed report of findings and analysis, relevant documents with citations, and a receipt for fees due. I understand that I am free to use the facts contained in the report and documents supplied as I see fit, but the report's ownership will remain with the Researcher. Written permission must be granted for inclusion in published works but limited photocopying in it's entirety for my researching purposes is granted.

I give permission for LaDonna Garner, CGSM to use the reports and documents relating to research services rendered to me in articles, lectures, and recertification to the Board for Certification of Genealogists®.

Client Signature _____ Date _____

Research Request(s): *Please attach or e-mail additional notes, documents and/or source citations of records previously searched and their positive or negative results to avoid duplication of previous work for each request below.

1.)

2.)

3.)

Minimum hours authorized _____ @ \$ _____ fee/request (or prior agreement) = \$ _____
Total deposit due.

Please note maximum amount allowed for copy fees \$ _____. I will be notified when Researcher has reached this limit and will not be billed further without my authorization. Copy and postage fees are additional and are billed with report. (Please view fees list attached.) Returned check charge is \$15.

Send total amount due as deposit with this agreement & Payable to: LaDonna Garner

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