



PHYLLIS CODLING McLAUGHLIN

111 Richwood Road, Milton, KY 40045 | (502) 514-3715 | TwistedRootsGenealogy@gmail.com

Professional genealogist specializing in DNA and Midwest/Southeastern US research.

SERVICES & FEES

- Review of information provided by client
- Formulation of work plan
- Research and Analysis
- Written report of findings, including negative findings
- Recommendations for future research
- Copies, transcriptions or abstracts of documents, as appropriate
- Evaluation of documents
- Translations of documents (optional; additional fee)

RETAINER FEE

\$75.00 for two-out minimum, payable in advance; other charges will be billed upon completion

Hourly Fees

\$50 per additional hour for services described above. Research time includes authorized travel and telephone and email consultations with client. Negative findings and unsuccessful searches are charged.

Reimbursable Expenses

Postage, photocopies, parking, and other incidental expenses, including meals and accommodations for requested on-site research trips. Travel expenses billed at rate authorized by IRS – currently 58-cents/mile. (February 2020)

Client: Please read the following page closely and ask for clarification, if needed. Then please fill out the requested information, determine your budget for this project to determine the number of research hours to authorize on this project. Under limitations, indicate authorization of travel for on-site research, as well as specific generations and time periods to be included.

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GENEALOGY SEARCH REQUEST

NAME: _____

ADDRESS: _____

PHONE: _____ **EMAIL:** _____

Please provide the following information here or on attached sheet(s):

NAME/NAMES TO BE RESEARCHED: _____

RESEARCH GOAL(S): _____

LIMITATIONS (time, collateral lines, historical period, etc.): _____

FAMILY INFORMATION:

To avoid being charged for duplicate work, please provide whatever information you have already compiled on the person or family to be researched. This should include family group sheets, ancestor/descendants charts, religious affiliations, known places of residence, dates and places of birth, marriage, death and other significant life events; sibling information, etc.

RECORDS: Include copies of records you have found (census, land, church, vital records, etc.)

AGREEMENT: Enclosed is a check for the initial retainer fee of \$75 for a two-hour research block. Additional _____ hours are authorized. Balance for additional time and/or reimbursable expenses are payable upon completion of the research. It is understood that time spent leading to negative findings also is charged.

SIGNATURE: _____

DATE: _____



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PERMISSION TO USE RESEARCH FINDINGS

DEAR CLIENT:

As a professional genealogist, I not only perform genealogical research and compile family histories. I also lecture, teach and write for publications in the genealogical field or in mainstream publications on topics relating to genealogy.

I prefer to use “real life” examples in my presentations or articles. In these, I may refer to some work I’ve done in your case. However, any personal or identifying information will remain confidential. I will not use names or non-redacted documents unless I have written permission from you or a member of your family who is representing your interests.

If you consent to allowing me to use information, documents or anything else related to your case deemed useful to teaching or telling a story, please initial each of the following statements (all that apply) and return this form to me by mail or digitally to the email address above.

Sincerely,

Phyllis Codling McLaughlin

_____ I permit PHYLLIS McLAUGHLIN to use in portfolios of her work to be reviewed by other professionals in the genealogical research report prepared for me.

_____ I permit PHYLLIS McLAUGHLIN to use as examples in genealogical lectures elements of the genealogical research that I commissioned of her.

_____ I permit PHYLLIS McLAUGHLIN to use as examples in genealogical publications of the genealogical research that I commissioned of her.

_____ If the genealogical research I commissioned is used in genealogical publications, I want my identity kept confidential.

_____ If the genealogical research I commissioned is used in genealogical publications, I want my address to be included.

_____ I permit PHYLLIS McLAUGHLIN to use my name as a reference.

SIGNATURE: _____

DATE: _____