Family database upgrade (Please text clearly.)

Thank you for contributing to keeping our family database up to date. We would like to point out that we **only** use your submitted updates to keep our digital family register as complete as possible. Please keep in mind that:

* If there are interesting life stories, these can be sent by mail or e-mail.
* Please send a photo of each person and indicate who it is.
* Phone number/e-mail are needed only so that we can contact you.
* Send mail to Spinnel-Anna, Storsandsjö 73, SE92292 Vindeln, SWEDEN or e-mail to span@vindeln.net

*Fill in ”Descendant to” and, if possible, the tabel number so that the person can be linked to the Familybook.*

Descendant to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tabel nr \_\_\_\_\_\_\_ (in the Familybook)

*Write all names of all people if possible, including surnamnes and mark first name. Pursue the original registered spelling of names and put nicknames in parentheses.*

Name, full \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Enter date of birth as DD-MM-YYYY. Place of birth alternative place of upbringing.*

Date of birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of brith \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*If applicable, fill in date of death and place of residence.*

Date of death \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of residence \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Profession \_\_\_\_\_\_\_\_\_\_\_\_ Phonenr./e-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address, place of residence \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Underline the form of cohabitation and state whether the partner may be a descendant of Spinnel-Anna.*

Married/partner/child with Name 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Marriage/engagement date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## *Enter name after marriage and possibly divorce (preferably year).*

Surname as married \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Divorced? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of death \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spinnel-Anna decendent Yes/No table? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Profession \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*For more children than 4, continue to fill in family 2 or send an attachment. (dob=date of birth, dod=date of death)*

# Children 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dob \_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dod\_\_\_\_\_\_\_\_\_\_

 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dob \_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dod \_\_\_\_\_\_\_\_\_\_

 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dob \_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dod \_\_\_\_\_\_\_\_\_\_

 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dob \_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dod\_\_\_\_\_\_\_\_\_\_

*Underline the form of cohabitation and state whether the partner may be a descendant of Spinnel-Anna.*

Married/partner/child with Name 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Marriage/engagement date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## *Enter name after marriage and possibly divorce (preferably year).*

Surname as married \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Divorced? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of death \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spinnel-Anna decendent Yes/No table? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Profession \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Children 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dob \_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dod\_\_\_\_\_\_\_\_\_\_

 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dob \_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dod \_\_\_\_\_\_\_\_\_\_