LACKAWANNA COUNTY APPLICATION FOR GENEALOGY SEARCHES WILLS/ESTATES 1878-Present

Signature of Person making the request: Signature required on all requests. PRINT or TYPE your name and address:			
Relation to person named on th	e certificate:		
Address:		City:	
State:	Zip:	Phone:	
PRINT or TYPE the informa requested certificate.	tion below with	regard to the person named on	
Number of Copies:			
Name of Decedent:			
File Number:		Date of Death:	

IMPORTANT: PLEASE NOTE The fee for Estate Genealogy searches is \$ **25.00 per search.** <u>All searches are non- refundable.</u> Please enclose a self-addressed envelope along with <u>a check</u> made payable to The Register of Wills in the applicable amount.

Mail requests to:

FRAN KOVALESKI Register of Wills Clerk of Orphans' Court Lackawanna County Government Center Suite 521 123 Wyoming Avenue Scranton, PA 18503-1632 570/963-6702