

SSGHS Photo Service Price Quote

Your name (please print) _____

Your address (please print) _____

Email address (please print) _____

Your phone number (please print) _____

Address of building(s) to photo (please print) _____

Name of cemetery (other subject) _____

Location of cemetery (other subject) _____

Cemetery office hours _____

Ancestor(s) names and approximate birth and death dates and gravesite location(s) or address of other location(s) that you want photographed: (The more information you can provide the less time and less cost to you.)

Use additional sheet if necessary _____

I understand that will the fee for this service is \$15.00/hour with a \$40.00 minimum and that SSGHS will provide a quote and then complete the request upon receipt of my check.

I also understand that it could take a few weeks to fill this order.

Your signature _____ Date _____

Mail request to:
SSGHS / Photo Service
3000 W. 170th Place
Hazel Crest, IL. 60429-1174

or email with a scan or photo of this page to:
info@ssghs.org