

# Texas Ranger Research Information Form

Name of Ranger \_\_\_\_\_

Date of Birth \_\_\_\_\_ Where \_\_\_\_\_

Date of Death \_\_\_\_\_ Where \_\_\_\_\_

Buried at \_\_\_\_\_

Service dates \_\_\_\_\_

Served under \_\_\_\_\_

Masonic Affiliation Yes \_\_\_\_\_ No \_\_\_\_\_

Relationship to Ranger \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Notes \_\_\_\_\_

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Staff intake initials \_\_\_\_\_ Date \_\_\_\_\_