

For Office Use Only	Reference Number: _____
Fee: _____	
Date Paid: _____	

RICHARDSON LIBRARY RESEARCH REQUEST

Date:	First Name:	Last Name:
Address:		
City:	State:	Zip:
Phone:	Email:	

TYPE OF RESEARCH (PLEASE CHECK ONE)

- | | | |
|--|---|--|
| <input type="checkbox"/> Personal Interest | <input type="checkbox"/> Use in Publication/Video/Website | <input type="checkbox"/> Student Project |
| <input type="checkbox"/> Railroad Modeler | <input type="checkbox"/> CRRM Internal | <input type="checkbox"/> Rolling Stock Restoration |
| <input type="checkbox"/> Genealogy | <input type="checkbox"/> Business Research | <input type="checkbox"/> Non-Profit (Museum Exhibit, Historical Society, etc.) |
| <input type="checkbox"/> Other - please briefly explain: | | |

DESCRIBE YOUR RESEARCH REQUEST

Be as specific as possible. Include pertinent information such as time period of interest, railroad company, names of people, locations, etc.

PAYMENT INFORMATION

Fees must be prepaid and are non-refundable. You will receive a research summary whether or not the search was successful. Fees include up to two hours of research and up to 10 8 ½ x 11" black and white copies

- CRRM Member: \$10 per search**
- Non-Member: \$15 per search**

Print and mail your completed form together with a check made payable to "Richardson Library" to:

**Richardson Library: Research
Colorado Railroad Museum
17155 W. 44th Avenue
Golden, CO 80403**

Questions? Contact us at 720-274-5148 or ResearchVolunteer@CRRM.org

