SURROGATE COURT RECORD REQUEST

I would like to request information on the Rensselaer County Surrogate Court Record for the individual shown below.

Last Name:

First Name:

File Number:

Date:

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Requester’s Name:

Address:

City: State: Zip:

Phone: Email:

1. Send check for $30 per file ($25 for RCHS and TIGS members) made payable to Rensselaer County Historical Society.
   1. Fee covers costs of locating and pulling file, photocopying all material in file, and mailing copies to you
   2. HCM will contact you when your request is received
   3. Allow at least 6 weeks for your file to be returned
2. Mail this form and check to:

Hart Cluett Museum  
Surrogate Record Request  
57 Second Street  
Troy, NY 12180