



## Research by Mail Request Form

1. **Please print** and fill out all sections of this form.

2. Mail this form with a **specific research request and payment** to: Research by Mail, Historical Society of Pennsylvania, 1300 Locust Street, Philadelphia, PA 19107-5699. If you are paying by credit card, you can also email us at [researchbymail@hsp.org](mailto:researchbymail@hsp.org).

We aim to complete all research requests within approximately 8 weeks of receiving payment. Rush requests will be completed within approximately 2 weeks.

Your name: \_\_\_\_\_ Today's date: \_\_\_\_\_

Friend of HSP (researcher level or above)? Circle one:    Yes    No

Daytime phone: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-mail: \_\_\_\_\_

Please add me to your e-mail list so I can receive news and updates from HSP.

### Research By Mail Fee Schedule (fees subject to change):

Service	Friends of HSP	Standard Fee
Research	\$40 per hour	\$60 per hour
Rush service	\$20 per hour	\$20 per hour
Premium service	\$15 per hour	\$15 per hour

**\*\*New / initial requests require a minimum of two hours.\*\***

### Method of Payment:

\_\_\_\_ Check (make checks payable to Historical Society of Pennsylvania)

\_\_\_\_ Credit Card (See below)

Amount \$ \_\_\_\_\_

### Credit Card Authorization:

I hereby authorize the Historical Society of Pennsylvania to charge the credit card number listed below for research/reference services.

Charge to:    Visa \_\_\_\_\_    Mastercard \_\_\_\_\_    American Express \_\_\_\_\_

Card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Cardholder name: \_\_\_\_\_

Cardholder signature: \_\_\_\_\_