Kansas Historical Society

Request For Information Regarding Soldier Home Records

I hereby request information from the Kansas Historical Society's state archives holding of Soldier Home records: Name: _____ Date of birth:____ Year admitted: ______ Year discharged: _____ Patient's date of death: I declare that my relationship to the deceased is: ______. I understand there is a reference service fee of \$20 in-state and \$25 out-of-state that must be submitted with this request (if not made in person) and will not be refunded even if no record can be found at the Kansas Historical Society. Please note: State archives holdings may be incomplete. The state archives is allowed, by state and federal statutes, to release information from these records, but is specifically prohibited from releasing medical information. Signature: Date: Print or Type Name: Email and phone number: For office use only: Date Received: Date Sent:

