

Toomer Family Update Form

Please use this form to record any information concerning births, deaths, marriages, divorce, adoptions, graduations, etc. which have occurred since September 1, 2004. This will allow us to keep an accurate record of our family's growth. Complete and return *immediately* to: **Floyd M. Riley, c/o Toomer Family Reunion, 104 Sweet Bay Avenue, Sicklerville, NJ 08081**

NAME OF INFORMANT	DATE
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BIRTHS

Child's Name	Sex	
Date of Birth	Hospital	
City	County	State
Mother	Father	
Child's Name	Sex	
Date of Birth	Hospital	
City	County	State
Mother	Father	

ADOPTIONS

Child's Name	Sex	
Date of Birth	Hospital	
City	County	State
Mother	Father	

MARRIAGE/DIVORCE (CIRCLE ONE)

Husband		
Wife		
Date of Event	Location	
City	County	State

DEATH

Name Cause
Date of Death Location
City County State
Cemetery City/State

DEATH

Name Cause
Date of Death Location
City County State
Cemetery City/State

GRADUATIONS HIGH SCHOOL / COLLEGE (CIRCLE ONE)

Name
Date Major
Name of School
Location Degree
Awards/Scholarships

HIGH SCHOOL / COLLEGE (CIRCLE ONE)

Name
Date Major
Name of School
Location Degree
Awards/Scholarships

HIGH SCHOOL / COLLEGE (CIRCLE ONE)

Name
Date Major
Name of School
Location Degree
Awards/Scholarships

OTHER — FEEL FREE TO SEND ANY OTHER INFORMATION, RELATING TO YOUR FAMILY MEMBERS, WHICH YOU WOULD LIKE TO SHARE WITH EVERYONE.