

Research Center
Request Form for Legislative Research

* indicates a required field. County required only for Montana residents.

* Date:

* First Name:

* Last Name:

* Address:

* City:

* State:

* Zip:

* Country:

* County:

* Daytime Phone:

Email:

RESEARCH REQUEST

Please be as concise and specific as possible. Requests that do not indicate what specific information you seek cannot be answered and will be returned. Please note that each bill requested constitutes one research request and will be bill accordingly. If you have several bills that need to be researched, please submit each bill as a separate research request.

Montana Code Annotated Citation [Title, Chapter and Part]:

Bill Number [Indicate House or Senate, Session Year, and Hearing dates, if known]:

Additional description of research requested:

PAYMENT INFORMATION

Fees must be prepaid and are non-refundable. You will receive a research summary whether or not the search was successful.

GHUbXUFX: YY. \$2) per bill

- includes first hour of research and up to 10 copies

MHS Members: 2 complimentary requests annually*

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*MHS Members receive two (2) complimentary research requests each year. This means two of any combination of general, genealogy or photograph research, **not** two of each type of research. Members must enter their membership expiration date to receive this member benefit. Resident and nonresident fees apply once annual benefit is used.

I am an MHS Member. My membership expires on:

Print and mail your completed form together with a check made payable to "Montana Historical Society Research Center" to:

Montana Historical Society Research Center
PO Box 201201
Helena, MT 59620-1201

Keep a copy of your completed form for your records!
Questions? Contact us at 406-444-2681 or mhslibrary@mt.gov