

**Birth Certificate**

Name on Birth Record: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

How many copies? \_\_\_\_\_

Parents Names (with Mother's Maiden): \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Indicate your Relationship to the person on requested record below:

- Self \_\_\_\_\_
- Spouse \_\_\_\_\_
- Registered Domestic Partner \_\_\_\_\_
- Parent \_\_\_\_\_
- Guardian \_\_\_\_\_
- Descendant \_\_\_\_\_
- Attorney of person on record \_\_\_\_\_
- Genealogist ID# \_\_\_\_\_

*By signing below, I swear/affirm that the information above is true and correct.*

Applicant Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_

*\$15 for 1<sup>st</sup> copy, \$6 for each additional copy*

Document # \_\_\_\_\_

**Death Certificate**

Full Name of Decedent: \_\_\_\_\_

Date of Death: \_\_\_\_\_

How many copies? \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Indicate your Relationship to the person on requested record below:

- Spouse \_\_\_\_\_
- Registered Domestic Partner \_\_\_\_\_
- Parent \_\_\_\_\_
- Guardian \_\_\_\_\_
- Descendant \_\_\_\_\_
- Attorney of person on record \_\_\_\_\_
- Genealogist ID# \_\_\_\_\_
- None of the above \_\_\_\_\_

*By signing below, I swear/affirm that the information above is true and correct.*

Applicant Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_

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Document # \_\_\_\_\_

**Marriage License**

Full Maiden Name of Spouse: \_\_\_\_\_

Full Name of Spouse: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_

How many copies? \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Indicate your Relationship to the person on requested record below:

- Self/Spouse \_\_\_\_\_
- Parent \_\_\_\_\_
- Guardian \_\_\_\_\_
- Descendant \_\_\_\_\_
- Attorney of person on record \_\_\_\_\_
- Genealogist ID# \_\_\_\_\_

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**Proof of Identity of applicant:**

Applicant must provide one of these:

- \_\_\_ Driver's License
- \_\_\_ Passport
- \_\_\_ Government issued picture I.D.

OR two of these:

- \_\_\_ Utility bills
- \_\_\_ Bank statements
- \_\_\_ Vehicle Registration
- \_\_\_ Income tax return
- \_\_\_ Personal Check w/address
- \_\_\_ A previously issued vital record
- \_\_\_ Letter from government agency requesting record (DHHS, WIC)
- \_\_\_ Department of Corrections I.D. card
- \_\_\_ Social Security Card
- \_\_\_ DD 214
- \_\_\_ Hospital; birth worksheet
- \_\_\_ License/rental agreement
- \_\_\_ Pay stub
- \_\_\_ W-2
- \_\_\_ Voter Registration card
- \_\_\_ Disability award from SSA
- \_\_\_ Other

**Establishing eligibility to acquire record:**

- \_\_\_ Related applicants must provide proof of lineage
- \_\_\_ Domestic Partners must provide proof of registration of domestic partnership
- \_\_\_ Attorneys must provide a signed, notarized release from family
- \_\_\_ Genealogists must provide a state-issued Card

*Do not retain copies of proof provided or note any specific numbers*

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