



VITAL RECORD CERTIFIED COPY REQUEST

Mark one: Birth Death Marriage Civil Union No Record Found

Name on Certificate _____
(Legal name at birth or death. For a marriage or civil union certificate request, full names of both parties)

Date of Event _____ Place of Event _____

Parent/Father name _____
(Required to order a birth certificate)

Parent/Mother maiden name _____
(Required to order a birth certificate)

Your relationship to person named on certificate _____

Number of certified copies _____

FEE: Birth, Marriage, Civil Union records: \$14.00 for 1st copy, additional copies \$11.00 each of same certificate.

Death records: \$18.00 for 1st copy, additional copies \$15.00 each of same certificate.

DOCUMENTATION: One readable photocopy of your valid Driver's License, State ID, or photocopy of Passport is required with your order. ID's must be VALID and NOT EXPIRED. If you do not have one of these forms of ID, please call: (217)253-2411.

Applicant Information

Name _____

Address _____

City, State and Zip Code _____

Daytime phone number _____

I affirm, under the penalty of perjury, that the representations made on this application are true to the best of my knowledge and belief.

Signature _____ Date _____

Please make check (Local Checks Only)/money order payable to: Douglas County Clerk
Send this form, copy of ID and payment to: Douglas County Clerk, Vital Records, 401 S. Center, P.O. Box 467
Tuscola, IL 61953