

# **Death Certificate**

Full Name of Decedent:

\_\_\_\_\_

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

Place of Death: \_\_\_\_\_

Applicant Name:

\_\_\_\_\_

Applicant Address:

\_\_\_\_\_

Indicate your Relationship to the person on  
requested record below:

- ☐ Spouse
- ☐ Registered Domestic Partner
- ☐ Parent
- ☐ Funeral Director
- ☐ Informant
- ☐ 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**

## **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**

INITIALS OF STATE PERSONNEL \_\_\_\_\_

CERT# \_\_\_\_\_ # of copies \_\_\_\_\_

AMOUNT PAID \_\_\_\_\_

CASH \_\_\_\_\_ CHECK# \_\_\_\_\_ CC \_\_\_\_\_

ID Shown: \_\_\_\_\_

ID #: \_\_\_\_\_

Expires: \_\_\_\_\_