

SHIAWASSEE COUNTY

CAROLINE D. WILSON
County Clerk
989-743-2242

208 North Shiawassee Street
Corunna, MI 48817
Fax 989-743-2241

HEATHER CRAMER
Chief Deputy Clerk
989-743-2262

APPLICATION FOR CERTIFIED BIRTH CERTIFICATE

\$20.00 for the first copy and \$8.00 for each additional copy of the same certificate purchased at the same time.

NAME ON CERTIFICATE: _____
First Middle Last

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

HAVE YOU EVER BEEN ADOPTED? _____ HAS THERE BEEN A LEGAL NAME CHANGE? _____

MOTHER'S MAIDEN NAME _____
First Middle Last

FATHER'S NAME _____
First Middle Last

NUMBER OF CERTIFICATES DESIRED: _____

COPIES OF BIRTH CERTIFICATES MAY BE RELEASED ONLY TO THE FOLLOWING:
Please check the one that applies. Proper identification (valid driver's license, with your current, correct address on it) must be presented. If mailing in request, please provide a copy of identification.

- _____ The person who is the subject of the record.
_____ A parent named on the certificate.
_____ An heir (if person is deceased and with a copy of death certificate).
_____ Legal Representative, Legal Guardian or Pursuant to a Court Order
(must have copy of legal paperwork).

Please be sure you read and understand the following before you sign.

I SIGN THIS DOCUMENT STATING THAT I AM NOT USING THIS CERTIFICATE FOR FRAUDULENT OR DECEPTIVE PURPOSES. 1978 PA 368; as amended (MCL 333.2894)

Signature

Today's Date

Printed name of requestor

Phone: _____

Address: _____

NOTE: This document will be retained in the office of the County Clerk indefinitely for purposes of prosecution.