JOYCE HUDMAN, COUNTY CLERK
111 E. LOCUST, SUITE 200
ANGLETON, TEXAS 77515-4654

Application For Certified Copy of BIRTH or DEATH Certificate

BIRTH
REQUESTED
_____ CERTIFIED COPIES @ $23.00 =_____
_____ VERIFICATION @ $5.00 = _____
TOTAL =_____
WE DO NOT ISSUE WALLET SIZE

DEATH
REQUESTED
_____ CERTIFIED COPIES @ $21.00 =_____
_____ ADDITIONAL COPY @ $4.00 =_____
_____ VERIFICATION @ $5.00 = _____
TOTAL =_____

IF MAILING INCLUDE COPY OF VALID ID, IF CREDIT CARD FAX ID

PLEASE PRINT

1. Full Name of Person on Record	First Name	Middle Name		Last Name
2. Date of Birth or Death	Month	Day	Year	Sex
3. Place of Birth or Death	City	County		State
4. Full Name of Father	First Name	Middle Name		Last Name
5. Full Maiden Name of Mother	First Name	Middle Name		Maiden Name

6. Applicant's Name: _____ 7. Telephone #: _____

8. Mailing Address: _____
Street Address City State Zip

9. Relationship to Person Named in Item 1: _____

10. Purpose for Obtaining this Record: _____

_____
Signature of Applicant

_____
Date

_____
DL / ID Number Exp Year

_____ ID Verified by Clerk

Credit Card Payment for Fax Request

Process Payment Online at
https://certifiedpayments.net
** $2.00 Convienence Fee*

Bureau Code - 3433402

Payment ID _____

Acceptable Methods of Payment - Cash, Money Order / Cashiers Check, Credit Card*

WARNING: THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT ON THIS FORM CAN BE 2-10 YEARS IN PRISON AND A FINE OF UP TO $10,000. (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003)

**** Office Use Only*** **Receipt #_____ Control #_____**