

Request for Search and/or certified copy of Birth, Death or Marriage Record

Today's Date: _____ Number of certified copies requested: _____

Full Name (or Names) on Record: _____

Type of Record Requested (Please check appropriate box) Birth Death Marriage

Date of Event: _____

City Where Event Occurred: _____

For Birth Records Only: Father's Name: _____
Mother's Maiden Name: _____

FOR BIRTH RECORDS ONLY: In order for your request to be processed, you must furnish this office with a photo copy of your Drivers License or State I.D. card. If one of these forms are not available, you must submit three other LEGITIMATE photo copies. The following forms may be used: Insurance card, Voter Registration card, Social Security card, Car Registration, recent check stub, or Department of Public Aid ID card. The fee for a certified birth record is \$10.00. Additional copies of the same record issued at the same time are \$2.00 each. Any individual under the age of 18 cannot secure a certified copy of their birth record.

Applicant's Signature: _____

Applicant's Address: _____

Applicant's Relationship to Person: (Self if applicable) _____

Death Records: No identification is required. The fee for a certified death record is \$10.00. Additional copies of the same record issued at the same time are \$4.00.

Marriage Records: No identification is required. The fee for a certified marriage record is \$10.00. Additional copies of the same record issued at the same time are \$2.00.

FOR OFFICE USE ONLY

_____ # of Certified Copies _____ Record # _____ Initials
ID# _____

Please mail or bring this form to:

Mark Von Nida
Madison County Clerk
157 N. Main Street STE 109
P.O. Box 218
Edwardsville, IL 62025-0218

Proper Identification is Required for Birth Records