

APPLICATION FOR SEARCH OF VITAL RECORDS

Record Requested _____
(Birth, Death or Marriage)

Full Name (s) listed on vital record:

Date of Event _____
(Birth, Death or Marriage date)

Place of Birth, Death or Marriage _____

Parent's name and address:

Father: _____

Mother: (including maiden name) _____

.....
Application made by:

Name _____
(Signature)

Address: _____

City _____ State _____ Zip _____

Mail Copy of Record to:

Name _____

Address _____

City _____ State _____ Zip _____

Relationship to above and reason for request

Please send this along with the required fee and a copy of your identification (driver's license) to Bureau County Clerk, 700 South Main St., Rm. 104, Princeton, IL. 61356