

Application for Search of Vital Records

RECORD

REQUESTED: _____

(Birth, Death, or Marriage)

Full Name (s) listed on vital record:

Date of Event _____

Place of Event _____

Parent's name and mom's maiden name:

Father: _____

Mother: _____

Application Made By:

Signature

Mail Copy of Record to:

Name: _____

Address: _____

City: _____ *State* _____ *Zip:* _____

Relationship to above and reason for request:

**Birth and Marriage records are \$18.00 for the first copy and \$4.00 for each additional copy when they are requested at the same time.*

**Death records are \$22.00 for the first copy and \$8.00 for each additional copy when they are requested at the same time.*

**Genealogical copies are \$10.00 for the first and \$2.00 for each additional copy when requested at the same time, provided they meet the criteria.*

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