

**BEVERLY B. KAUFMAN, HARRIS COUNTY CLERK
P. O. BOX 1525 • HOUSTON, TEXAS 77251-1525 • (713) 755-6438**

APPLICATION FOR CERTIFIED COPY OF TEXAS BIRTH OR DEATH CERTIFICATE

<p>BIRTH <input type="checkbox"/></p> <p># REQUESTED _____</p> <p>_____ CERTIFIED COPIES X \$23.00 = _____</p> <p>TOTAL ENCLOSED = _____</p>

<p>DEATH <input type="checkbox"/></p> <p># REQUESTED _____</p> <p>_____ CERTIFIED COPY X \$21.00 = _____</p> <p>_____ ADDITIONAL COPIES OF SAME RECORD X \$4.00 = _____</p> <p>TOTAL ENCLOSED = _____</p>
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**PLEASE PRINT
See Reverse Side for Instructions**

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

7. APPLICANT'S NAME: _____ 8. TELEPHONE #: (_____) _____
(MON-FRI 8:00 A.M. - 4:30 P.M.)

9. MAILING ADDRESS: _____
STREET ADDRESS CITY STATE ZIP

10. RELATIONSHIP TO PERSON NAMED IN ITEM NO. 1: _____

11. PURPOSE FOR OBTAINING THIS RECORD: _____

12. ADDITIONAL IDENTIFYING INFORMATION FOR DEATH CERTIFICATE.

BIRTH DATE: _____ BIRTH PLACE, ETC. _____

WARNING: THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT IN 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)

SIGNATURE OF APPLICANT

DATE

IDENTIFICATION TYPE _____
Drivers License, I.D. Card, etc.

NUMBER: _____
On Drivers License, I.D., Card, etc.

ATTACH PHOTOCOPY of a VALID STATE ISSUED DRIVER'S LICENSE OR IDENTIFICATION CARD

Fees are subject to change without notice (call 713 / 755-6438 for fee verification)

Birth records are confidential for 75 years and death records for 25 years; therefore, issuance is restricted. Please **attach a photocopy** of ID to application.

Administrative rules require that on restricted records, all identifying information (items 1 - 6), relationship (item 11), and purpose (item 12) be provided in order to issue the record.

Form No. D-02-22 (Rev. 10/19/2009)