

MISSAUKEE COUNTY CLERK
111 S. CANAL ST.
P.O. BOX 800
LAKE CITY, MI 49651

PHONE 231-839-4967 Ext 201
FAX 231-839-3684

REQUEST FOR CERTIFIED COPY OF BIRTH CERTIFICATE

ELIGIBILITY

MICHIGAN LAW LIMITS WHO MAY RECEIVE A CERTIFIED COPY OF A MICHIGAN BIRTH RECORD

- THE PERSON NAMED ON THE RECORD
- A COURT APPOINTED LEGAL GUARDIAN OF THE PERSON NAMED ON THE RECORD
- AN HEIR OF THE DECEASED PERSON NAMED ON THE RECORD (PROOF OF RELATIONSHIP AND DEATH REQUIRED).
- A COURT OF COMPETENT JURISDICTION
- A PARENT NAMED ON THE RECORD

Relationship Status

- I am requesting my own birth certificate
- Birth record is at least 100 yrs old.
- I am requesting my child's birth certificate
- Other: Court

NAME ON RECORD _____
First Middle Last

DATE OF BIRTH _____
Month Day Year

MOTHER'S MAIDEN NAME _____
First Middle Last

FATHER'S NAME _____
First Middle Last

APPLICANT

FEE

Name

\$10.00 for the first copy, \$3.00 for each additional copy of the same document.

Street Address

City/State/Zip

Number of copies requested.

Phone Number

TOTAL FEE

Signature of Applicant

Date