Death Certificates				
Туре	Cost X	# of copies =	Total	
Certified Copy	\$21			
Additional Copies	\$4			
	-	Total		

OFFICE USE ONLY	☐ CASHIERS CHECK ☐ MONEY ORDER
REMITTANCE NO	CERT. #
DATE	AMOUNT \$
DOCUMENT CONTROL #	

MAIL APPLICATION FOR DEATH RECORD

PLEASE PRINT (') VALTE 1	ID 14/11	IENI CENID	TNC TN TUE	DEOUES.	T ADDITOA	TION MUST F	DE ODICINAL	
(INCLUDE A COP	<u>Y OF YOUR (APPLICANT</u> GNATURE). NO CROSS C	UT OR W	WH עו HITF י	IEN SEND. OUT WILL	BE VCCED	: KEQUES TED. SFF	I. APPLICA INSTRUCTI	ONS ON BAC	K. DE OKIGINAL	
	NFORMATON AND SHIPP					TEDI OLL	INSTRUCTI	OND ON BAC	TXI	
	st, Middle, Last Name):			•						
Street Address:				City:			State:	Z	ip Code:	
Email Address:					Daytime Phone Number:					
	hip to Person named on Funeral Home			eck One):	□Chi	ld 🗆	Spouse	Parent	Sibling	
Grandparent T authoriz	ze mailing to the address	Othe		of my ma	ailing addre	es listed	ahove			
Name:	te maning to the address	BCIOW III	isteau	Of my me	annig addit	.33 HStcu	above.			
Address to Send to if different than noted above:			City:		State:		ip Code:			
Reason for Rec		Other:		1						
Step 2: INFORM	IATION FOR PERSON NA	MED ON D	DEATH	RECORD	(Must be c	ompleted	to Identify	Record Requ	uested)	
FULL NAME ON RECORD:	E First Name		Middle Name			Last Name				
DATE OF DEATH:	Month	Day	Year		DATE OF BIRTH:	Month	•	Day	Year	
SEX:		SOCIAL S	SECUR	ITY NUMBI	ER:	-	-			
PLACE OF DEATH:	City or Town			County			TEXAS ONLY			
FULL NAME OF PARENT 1:	First Name			Middle Name			Maiden	Maiden Last Name (Before first marriage)		
FULL NAME OF PARENT 2:	F First Name			Middle Name			Maiden	Maiden Last Name (Before first marriage)		
Step 3: AFFIDA	/IT (NOTARY SECTION)									
STATE OF										
COUNTY OF_										
Before me on	this day appeared									
			(Na	ame)						
now residing a	at(Address)			(City)			(State)		
Who is related	I to the person named on Pa	rt 1 as				nd who on o	oath disposes	s and says the	contents of	
(Relationship) this affidavit are true and correct.										
ano amaanta										
Signature of A	Applicant				_					
Sworn to and s	subscribed before me, this		day of		,	20				
(Pe	ersonalized Seal)					(Nota	ry Public's Si	gnature)		

MAIL APPLICATION FOR DEATH RECORD

Copies of death certificates for deaths that occurred within the past 25 years can be requested only by immediate family members of the person whose name is on the certificate. See Section 181.1(13) of the Texas Administrative Code for who qualifies as an immediate family member. An immediate family member is the decedent's child, spouse, parent, sibling, or grandparent.

Applicants who are not immediate family members must provide legal documentation (such as an insurance policy listing the applicant as the beneficiary) that documents a direct, tangible interest in the death certificate.

The applicant must include a photocopy of his or her valid photo ID issued by a governmental entity. See Section 181.28 of the Texas Administrative Code for a complete list of acceptable forms of identification. You also can see VSS's page on acceptable identification in English (http://www.dshs.texas.gov/vs/reqproc/Acceptable-IDs/) and Spanish (http://www.dshs.texas.gov/vs/reqproc/Acceptable-IDs-(Spanish)/).

Applications for death certificates cannot be processed without a copy of a photo ID or alternate IDs and the signature of the applicant.

<u>Verification Letter</u> - A verification letter will include the decedent's name, the date of death, and the county where the death occurred. Verification letters are available for deaths that have occurred since 1903. Verification letters are not considered legal substitutes for certified copies of death certificates. The VSS strongly recommends that applicants ensure a verification will satisfy its intended use.

If a record is not on file, our office will issue a "not found" letter.

Customer Checklist

Ju	Stoffer eneckist
	\square Complete steps 1, 2, and 3 of the application. Please type or print clearly.
	\square Complete step 4 of the application and have it notarized, if requesting a birth certificate.
	\square Sign and date the application.
	$\hfill\square$ Make sure the application is original and not a photocopy and there are no cross-outs or white-out.
	☐ Enclose a copy of a current driver's license, passport or state identification. See complete ID list on our website.
	☐ Enclose appropriate fees. Make CASHIERS checks or money orders payable to:

(NO PERSONAL CHECKS)

Jackie Ensey, Stephens County Clerk 200 West Walker Street Suite 116 Breckenridge, TX 76424