MONTANA VITAL STATISTICS 111 N SANDERS RM 209 / PO BOX 4210 **HELENA, MONTANA 59604-4210**

Phone: 406-444-2685

PLEASE READ THESE INSTRUCTIONS CAREFULLY

WHO CAN ORDER A BIRTH CERTIFICATE?

Only those authorized by 50-15-121 MCA and 37.8.126 ARM, which includes the registrant (14 years old or older), the registrant's spouse, children (with proof of relationship), parents, grandparents (with proof of relationship), a caretaker relative, guardian, an authorized representative, or those who provide documentation showing it is needed for determination or protection of the individuals personal or property rights. Proof of relationship, guardianship, caretaker relative, or authorization is required to obtain a certify copy of a birth record.

Step-relatives, in-laws, aunts, uncles, cousins, ex-spouses, and a natural parent of an adoptive child are not eligible to receive a certified copy of a birth certificate.

IDENTIFICATION IS REQUIRED

The person signing the request must provide an enlarged legible photocopy of both sides of their valid driver's license or other legal picture identification with a signature or the requestor must have this application notarized.

Suggested Identification

Picture ID with a Signature	OR Two Forms of ID – One MUST have a Signature		OR
Driver's License	Social Security Card	Credit/Debit/ATM Card	Notarized Montana Office of Vital
State ID Card	Work ID Card	 School ID Card 	Statistics Statement to Identify certified
 Passport 	Car registration/Insurance	 Library Card 	Birth or Death Certificate Applicant form
Military ID Card	Doctor/Medical record	 Insurance Record 	(you must provide the original letter, not a
• Tribal	Fishing License	 Pay Stub 	photocopy or faxed copy)
	US Military DD214	 Traffic/ Pawn ticket 	Have an authorized family member that
	Utility Bill with a current address	 Court record 	has an ID order the certificate
	Voter Registration Card	 Year Book 	

If a picture ID with a signature is not available, two other forms of identification are required; one MUST have a signature. Please include photocopies of both sides of the ID when mailing your request

IMPORTANT: If the identification requirement is NOT met or if the application is incomplete, your request will be returned and significant delays in processing your order may occur.

FEE (All fees must be U.S. funds)

CERTIFIED INFORMATIONAL COPIES OF AN ORIGINAL BIRTH CERTIFICATE cost \$25.00 for the first copy, \$5.00 for each additional copy of the same record. (non-refundable)

PLEASE MAKE CHECKS PAYABLE TO: MONTANA VITAL RECORDS

PLEASE FILL OUT THIS FORM WITH THE INFORMATION THAT IS ON YOUR CURRENT RECORD

Please complete the f	ollowing information.			
FULL First, Middle and Last Name on current Birth Certificate:				
Has name ever been changed other than marriage No Yes if so original name				
Date of Birth:	Place of Birth (City or County):			
Mother's Full Maider	<u>1</u> Name:	_		
Father's Full Name:		# of copies needed		
Your relationship to the certificate holder:(self, mother, father etc) Reason the Birth Certificate is needed: OPEN FILE-				
ORIGINAL BIRTH CERTIFICATE				
Mailing or Delivery Address:				
Name:	Applicant's Signature			
Address:				
City, State, Zip: Daytime Telephone Number:				
	Notary (For use if needed)			
personally appeared before me and whose identity I proved on				
the basis of satisfactory evidence to be the signer of the above instrument.		Official Use Only		
Subscribed and sworr	n to before me this day of 20	Date		
		Rec#		
SEAL		Amount		
	Signature:	Cert #		
	Printed Name: Notary Public in and for the State of	Ser #		
	Residing atMy commission Expires	Comment		

NOTICE: STATE LAW PROVIDES PENALTIES FOR PERSONS WHO WILLFULLY AND KNOWINGLY USE OR ATTEMPT TO USE THIS CERTIFICATE FOR ANY PURPOSE OF DECEPTION. (50-15-114, MCA)