MONTANA OFFICE OF VITAL STATISTICS 111 N SANDERS RM 6 / PO BOX 4210 HELENA, MONTANA 59604-4210 Phone: 406-444-2685 PLEASE READ THESE INSTRUCTIONS CAREFULLY

WHO CAN ORDER A DEATH CERTIFICATE?					
Complete copies of a certified	death certificate will be issued to anyone wh lists the cause of death as "pending autopsy'	o submits a completed appl	ication, establishes th	eir identity, and lists the reason for needing	
removed will be issued.	itsts the cause of death as pending autopsy	or pending investigation	, a certified copy will	en has the cause of death information	
	IDENTIF	ICATION IS REQUIR	ED		
	must provide an enlarged legible photocopy			her legal picture identification with a	
signature or the requestor must	t have this application notarized.	gested 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 Ca		otarized Montana Office of Vital Statistics	
State ID Card	Work ID Card	School ID Card		tatement to Identify certified Birth or Death	
Passport Military ID Cond	Car registration/Insurance	Library Card	C	ertificate Applicant form (you must rovide the original letter, not a photocopy	
Military ID CardTribal	Doctor/Medical recordFishing License	Insurance RecordPay Stub		faxed copy)	
- Inour	• US Military DD 214	 Traffic/ Pawn ticket 		ave an authorized family member that has	
	• Utility Bill with a current address	Court record	aı	n ID order the certificate	
	Voter Registration Card	Year Book			
the ID when mailing your requ	est	ation are required; one WO	SI nave a signature.	Please include photocopies of both sides of	
	ication requirement is <u>NOT</u> met or if the a	pplication is incomplete, y	our request will be	returned and significant delays in	
processing your order may o					
CERTIFIED COPIES OF	FEE (A F A DEATH CEDTIFICATE post \$12.00 f	Il fees must be U.S. funds)) ach additional conv	of the same record (non refundable)	
 <u>CERTIFIED COPIES OF A DEATH CERTIFICATE</u> cost \$12.00 for the first copy, \$5.00 for each additional copy of the same record. (non-refundable) <u>INFORMATIONAL COPIES OF A DEATH CERTIFICATE</u> the cost is \$10.00. (non-refundable) 					
• CERTIFIED COPIES OF DOCUMENTS on file with the state (i.e., correction affidavits), the cost is \$12.00 (non-refundable)					
• <u>SEARCHES</u> : \$10.00 for the first 5 years searched, then \$1.00 per year over the first five years per name requested. (An informational copy will be issued if record is					
found) (non-refundable)					
Please complete the follow	ving information.				
Decedent's Name:					
Date of Death (We need a date to begin searching if date is unknown): Date of Birth:					
Place of Death: Place of Birth:					
Parents Names:					
Occupation:	Spouse's Name:				
Number of Copies	Type of record needed? Certified Not Certified				
Reason record is needed					
Mailing or Delivery Ad	ldress:				
Name:					
Address:					
City, State, Zip: Daytime Telephone Number:					
Signature of Applicant: Relationship:					
		ry (For use if needed)	· · · · ·		
	personally appeared before me and	whose identity I proved on		Official Use Only	
the basis of satisfactory evidence to be the signer of the above instrument.			Date		
Subscribed and sworn to befor	e me this day of _	20			
				Amount	
			Cert #		
			Ser #		
	Signature:		Comment		
SEAL	Printed Name:		-		
	Residing atMy commis	sion expires	-		

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)