🗞 Death Certificate 🤜

Please print out this form and return to:

Town Clerk's Office 60 Center Square East Longmeadow, MA 01028-2457

Requests submitted through the mail, will be processed on the date they are received.

Full name of the person on the Record of Death

| First | Middle | Last | |
|------------------------------|--------|--------------|--|
| Date of Death | | | |
| Month | Day | Year | |
| Exact Location of this Death | | | |
| Hospital, Nursing Home, etc. | | City of Town | |
| Signature of Requester | | | |
| Daytime telephone number | | | |
| | | | |
| Area Code Number | | | |
| Return Mailing Address | | | |
| | | | |

- Payment may be made in cash, money order or certified bank check. (Do not mail cash)
- Personal account checks are **not accepted**.
- Certified copies cost \$10.00; please enclose a self addressed stamped envelope for each transaction through the mail.
- * Make money order or certified bank check payable to "Town of East Longmeadow"