



Public Health
Prevent. Promote. Protect.

Columbia/Boone County Public Health & Human Services
1005 West Worley | Columbia, MO 65203 | 573-874-6396



Missouri Birth and Death Certificate Application

Which certificate do you need?

☐

Birth Certificates
\$15 each

☐

Death Certificates
\$13 for 1st copy
\$10 for each extra copy

How many copies do you need? _____

Full Name on Certificate: _____

For Birth Certificates - Date of Birth (month/day/year): _____

For Death Certificates - Date of Death (month/day/year): _____

Full Name of Parent 1 (Last name before marriage/domestic partnership): _____

Full Name Parent 2 (Last name before marriage/domestic partnership): _____

Your Relationship
to Person Named
on Certificate

☐

Self

☐

Child

☐

Grandchild

☐

Other (specify) _____

☐

Parent

☐

Sister

☐

Current Spouse

☐

Grandparent

☐

Brother

☐

Legal Guardian (with judgement of custody)

**YOUR
CURRENT
INFORMATION**

Your
Name: _____

Your
Address: _____

Your Phone Number:
(with area code) _____

City, State/Zip: _____

I, the undersigned, subject to penalty of perjury, do solemnly declare and affirm that I am eligible to receive a certified copy of the vital record (birth or death certificate) requested above and that the information contained in this application is true and correct to the best of my knowledge.

YOUR SIGNATURE: _____ TODAY'S DATE: _____



STOP HERE UNLESS MAILING APPLICATION

- **If mailing application, send to:** Columbia/Boone County Department of Public Health and Human Services, 1005 W. Worley, Columbia, MO 65203.
- Mailed applications must be **signed and notarized**, and include a check or money order payable to City of Columbia.
- Please include a stamped, self-addressed envelope.

State of _____
County of _____

On this _____ day of _____ in the year _____,
before me, the undersigned notary public, personally appeared _____,

known to me to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seal.

Notary Public

Notary Embosser Seal or Black Rubber Stamp Below