California Vital Records Authorization Form

Instructions:

- 1. In the box, print the BIRTH name of the person on the certificate and your relationship to that individual (i.e., if it is you, write "self". If you are the parent, write "parent", etc.).
- 2. Print and complete the form. Use your CURRENT name on the top line, signature, etc.
- 3. Sign and date the form in the presence of a public notary.
 4. Fax or email back, Fax: (415) 549-8691. Email: processing@s

California, that I am an authorized person, as defined in the California Health and Safety Code Section 103526(and am eligible to receive a certified copy of the birth, death, or marriage record of the following individuals(s). of Person Listed on Certificate Authorized: Sworn thisday of, 20at, (Day) (Month) (City) (State) Signature Note: If submitting your order online or by fax and requesting an Authorized Birth, Death or Marriage Certificate you must have your Sworn Statement notarized using the Certificate of Acknowledgment, below. A notary public or other officer completing this certificate verifies only the identity of the individual who signed th document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. Certificate of Acknowledgment State of, NOTARY PUBLIC, personally appeared,, who proved to me on the basis of (insert name and title of officer), who proved to me on the basis of (insert name of person signing) satisfactory evidence to be the person(s) whose names(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or entity upon behalf of which the person(s) acted, executed the instrument.	1		Sworn Sta				
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AUTHORIZATION FORM SAMPLE (THIS IS JUST FOR YOUR REFERENCE)

Common Error Checklist

- -Make sure to list the person's birth name and your relationship to that person in the box
- -Make sure the dates on the top and bottom portion match
- -Make sure the notary uses an ink stamp and lists his or her notary expiration date.

		Sworn State	ement
ı, Joh	n Sample	swear/affirm	under penalty of perjury under the laws of the State of
	-		California Health and Safety Code Section 103526(c), th, or marriage record of the following individuals(s).
ne of Person Listed o	n Certificate		Relationship to Person Listed on Certificate
th-Authorized: J0	nn Sample		Self
Sworn this 511	day of <u>l0th_</u> , 20_ <u>l</u>	5 at Houston	. TX
(Day)	(Month)	(City)	(State)
		_	John Sample
			Signature
_	-	fax and requesting an Aut Certificate of Acknowledg	thorized Birth, Death or Marriage Certificate you must have ment, below.
			only the identity of the individual who signed the document fulness, accuracy, or validity of that document.
		Certificate of Ackr	nowledgment
State of	Texas)	
) ss	
County of	<u>Harris</u>)	
On <u> 0/5/15</u>	, before me,	Jennifer Notary	, <u>NOTARY PUBLIC</u> , personally
	والمرام والما	(insert	name and title of officer)
appeared,	<u>John Sample</u>		, who proved to me on the basis of
acknowledged to	me that he/she/they ature(s) on the instru	n(s) whose names(s) is vexecuted the same in	/are subscribed to the within instrument and his/her/their authorized capacity(ies), and that by entity upon behalf of which the person(s) acted,
I certify under PE true and correct.	ENALTY OF PERJUI	RY under the laws of the	e State of California that the foregoing paragraph is
			Witness my hand and official sea
	Jennifer Notar ry Signature	y	(NOTARY SEAL)
Nota	ry Signature		Innetted Nation
			Jennifer Notary

Notary Public, State of Texas

My Commision Expires 3/3/18