AMY BRITTON
CLAY COUNTY CLERK
P.O. BOX 160
LOUISVILLE, IL 62858
618-665-3626

APPLICATION FOR SEARCH OF BIRTH RECORD

Before filling out Application, please be certain that the BIRTH occurred in Clay County

CERTIFIED COPY OF BIRTH RECORD
$16.00 each
$7.00 for each additional certified copy of the same record
OF COPIES REQUESTED: _____

AMOUNT ENCLOSED: $_____

GENEALOGICAL COPIES
The birth record MUST be on file for at least 75 years
$5.00 each
OF COPIES REQUESTED: _____

AMOUNT ENCLOSED: $_____

Name on Record: _____ (First) _____ (Middle) _____ (Last)

Date of Birth: _____ (MM/DD/YYYY) **Place of Birth:** _____ (City or Town)

Father's Name on Record: _____ (First) _____ (Middle) _____ (Last)

Mother's Name on Record: _____ (First) _____ (Middle) _____ (Maiden)

****PHOTOCOPY OF YOUR DRIVER'S LICENSE OR STATE-ISSUED PHOTO ID IS REQUIRED****

I, the undersigned, do hereby certify that as the person whose record is sought, or as the parent, guardian, or legal representative of the person, I am legally entitled according to the Illinois State Statute.

APPLICATION MADE BY:

_____
NAME (Signature)

_____
STREET ADDRESS

_____
CITY STATE ZIP

_____
PHONE NUMBER WITH AREA CODE

_____
RELATIONSHIP TO PERSON OF RECORD

MAIL COPY TO (if other than applicant):

_____
NAME

_____
STREET ADDRESS

_____
CITY STATE ZIP

_____

_____
INTENDED USE OF DOCUMENT

Please make check or money order payable to: Clay County Clerk