Mecosta County Clerk's Office

400 Elm Street, Big Rapids, MI 49307 (231) 592-0783

CERTIFIED COPY OF BIRTH CERTIFICATE

1. Name at Birth:					
	First	Middle		Last	
2. Date of Birth:	B.A	D		Voor	
3. Place of Birth:	Month	Day		Year	
5. Flace of Birth.	Hospital(If known)	City		County	
4. Parent Name:					
	First	Middle		Surname(maiden)	
5. Parent Name:	pa	NA: Jalla		Surname(maiden)	
	First	Middle		Surname(maiden)	
6. Person request	ing record(circle one):	Self	Parent	Other	
	CERTII	FIED COPY OF	MARRIA	GE LICENSE	
1.Names at the tir	ne of application for m	arriage license:			
Name:		1 100 100 100			
	First	Middle		Last (Maiden)	
Name:		N A :		Loot/Maidon)	
	First	Middle		Last(Maiden)	
2. Date of Marriag					
3. County where li	cense was obtained:		-		
	CERTIF	IED COPY OF E	EATH CE	ERTIFICATE	
1. Name of Deceas	sed:				
	First	Middle		Last	
2. Date of Death:		_ Place of Death:			
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APPLICANT'S NA	AME:				
ADDRESS:					
STREET					
CITY		STATE		ZIPCODE	
APPLICANT	'S SIGNATURE:				
APPLICANT'S PH	IONE NUMBER:				
	NUMBER OF COPIES	REQUESTED:			

Records are \$10 for one copy and \$5 for each additional copy of the same record.

COPY OF PHOTO I.D. IS REQUIRED FOR ALL BIRTH REQUESTS

MAKE CHECK PAYABLE TO: MECOSTA COUNTY CLERK

INSTRUCTIONS

Certified copies of birth certificates are available to eligible persons on request. To obtain a certified copy of a birth record the applicant must be:

- 1. The individual who is the subject of the record.
- 2. The parent(s) named on the record.
- 3. Any heir.
- 4. Legal guardian.
- 5. Any legal representative of an eligible person. (Legal representatives must state whom they are representing and show proof of said representation.)

Birth records for newborn children are not immediately available. Please allow at least 30 days from date of birth for the hospitals to get the records to our office.

Our office will accept cash, personal check or money order for payment. Check or money order must be made payable to: **MECOSTA COUNTY CLERK.**

Birth Certificate should be mailed to:

Name:	1000	100.00	
Address:			
City:	State:	Zip Code:	
Phone:			

^{**}Please note, if the address you would like the **birth record** mailed to does not match the address listed on your I.D. you must provide proof of residency elsewhere (i.e. utility bill, rental agreement etc).