

MONTMORENCY COUNTY CLERK  
PO BOX 789, ATLANTA, MI. 49709  
PHONE 989-785-8022

Complete the following for all requests

Fee: \$10.00 for one certified copy of a birth, death or marriage record.

\$ 5.00 for each additional copy of the same record purchased at the same time.

The issuance of records is governed by Michigan statutes and all copies issued by this office are certified copies with a "raised" seal.

**BIRTH CERTIFICATE**

Photo ID must be presented when requesting a birth certificate in person, photocopy is required for mail requests.

**Birth certificates are confidential records and are available to only the person or parents named on the record.**

Name on birth certificate: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Father's full name: \_\_\_\_\_

Mother's full maiden name: \_\_\_\_\_

Check one of the following:

\_\_\_\_\_ I am requesting my own birth certificate      \_\_\_\_\_ I am requesting my child's birth certificate

\_\_\_\_\_ I am an heir of the person named      \_\_\_\_\_ I am a legal representative of the person  
provide verification      provide verification

**DEATH CERTIFICATE**

Name of deceased: \_\_\_\_\_

Date & Place of death: \_\_\_\_\_

**MARRIAGE CERTIFICATE**

Name of bride: \_\_\_\_\_

Name of groom: \_\_\_\_\_

Date of marriage: \_\_\_\_\_

Name & Address of person requesting certificate: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone number: \_\_\_\_\_

I, the undersigned, affirm that I am in compliance with Michigan statutes in requesting the above records.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature