

Ohio Department of Health • Office of Vital Statistics

APPLICATION FOR CERTIFIED COPIES

Walk-in service (allow 30-60 minutes)

(8:00 AM – 5:00 PM, Mon–Fri, closed holidays)

Ohio Department of Health
Office of Vital Statistics
225 Neilston Street
Columbus, OH 43215
(614) 466-2531

Mail-in order

Send completed application with required fee to:
Ohio Department of Health, Revenue Room
246 North High Street, 1st floor
P.O. Box 15098
Columbus, Ohio 43215-0098
(614) 466-2531

This space for office use only
Order (AFS) number
Certificate number

REGISTRANT INFORMATION: (information about person whose vital record is being requested)

<input type="checkbox"/> Birth \$21.50 per certified copy or abstract <input type="checkbox"/> Stillbirth Free to birth parents for stillbirths after Sept. 26, 2003 <input type="checkbox"/> Paternity Affidavit \$7.00 per certified copy <input type="checkbox"/> Heirloom Birth \$25.00 per certified commemorative abstract <input type="checkbox"/> Death \$21.50 per certified copy <input type="checkbox"/> Fetal death \$21.50 per certified copy	Full name : (for birth, indicate child's full name as shown on original birth record): Place of birth/death (City/County in Ohio): Full maiden name of mother (prior to first marriage): Have there been any corrections or legal changes made to certificate? Yes No	Date of birth/death: CPR stamp number (Paternity only): Full name of father: If name was changed since birth, indicate new name:
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SEARCHES: If the full legal name or date of event is unknown, the fee to search is \$3.00 per ten-year period. If the request is located and you would like a certified copy of the birth or death record, an additional charge of \$21.50 is required with the order. Searches will take 1 - 2 months to process. Submit this application providing as much identifying information known for the event. If not all information is known, provide as much as possible.

<input type="checkbox"/> Record Search: \$3.00 per ten year period searched <input type="checkbox"/> Marriage <input type="checkbox"/> Divorce <input type="checkbox"/> Birth <input type="checkbox"/> Death	Full name of registrant: Date of event: Specify years to be searched:	For marriage/divorce, specify full name of spouse: Place (City/County in Ohio):
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CHARGES:

Total number of standard copies or abstracts (birth, death, fetal death):	X	\$21.50 =	\$
Total number of heirloom commemorative birth certificates:	X	\$25.00 =	\$
Total number of paternity affidavits:	X	\$7.00 =	\$
Total number of searching fees (\$3.00 per ten year period):	X	\$3.00 =	\$
TOTAL AMOUNT DUE:			\$

For mail orders, please include check or money order (do not send cash) made payable to "TREASURER, STATE OF OHIO". Overpayment of \$2.00 or less will not be refunded.

Signature of Applicant:		Pursuant to Ohio Revised Code 3705.29, it is unlawful to purposely obtain, possess, use, sell, furnish, or attempt to obtain, possess, use, sell or furnish to another for the purpose of deception any certificate, record or certified copy of it that relates to the birth of another person, whether living or dead.
Phone number:	() -	

APPLICANT INFORMATION: (please print clearly as this address will be used for mail order delivery)

Applicant name:	
Street address:	
City, State & Zip code:	