## OSCODA COUNTY

Application for Death Record

The fee is \$10.00 for the first certified copy and \$5.00 for each additional copy of the same record when ordered at the same time.

Number of copies requested			
Name on Record: Last	First:	Middle:	
Date of Death: Month	Day:	Year:	

Applicants Relationship to Deceased: \_\_\_\_\_

PA 452 includes 'vital records' in the list of items defined as 'personal identifying information'. The law further states that anyone who obtains, or attempts to obtain a vital record of another person with the intent to commit identity theft or commit another crime is guilty of a felony punishable by imprisonment for up to five years and/or a fine of up to \$25,000.

## APPLICANTS INFORMATION: (PERSON REQUESTING RECORD)

Name:		
Address:		
City, State / ZIP:		· · · · · · · · · · · · · · · · · · ·
Signature of Applicant – Acknowledged before (Signature)	•	
Subscribed and sworn before me this by person listed above.		A.D.
Signature: Print:		
Notary Public: Count	ty, in the State of	
My Commission Expires	"Outside of MI require	s Notary Seal"

Mail this Application with a check or money order payable to:

Oscoda County Clerk PO Box 399 Mio, MI 48647

For additional Information call: 989-826-1109; Fax: 989-826-1136

Clerk's Information:

Receipt #	<u> </u>
\$ Amount _	
Date:	