APPLICATION FOR SEARCH OF VITAL RECORDS IN GRUNDY COUNTY, ILLINOIS

KAY T. OLSON Grundy County Clerk & Recorder 111 E. Washington Street Room 12, Morris, IL 60450 815-941-3222 option 1

The Grundy County Clerk's Office will issue certified copies of Vital Record to authorized individuals only. To do otherwise is a violation of Illinois Law. Vital Records are not considered public information, nor are they subject to the Freedom of Information Act. No information regarding Vital Records will be given over the telephone under Illinois State Law (410 ILCS 535-Vital Records Act). We only have Vital Records for events that occurred in Grundy County, Illinois.

Request for search of: BIRTH RECORD

CILL DIDTH NAME.

Illinois Law provides that birth record may only be obtained by the individual if 18 years of age, by the parents or other legal representative. A photocopy of a VALID State Driver's License or State ID of the person requesting the certificate is required. If applicable, a copy of guardianship / legal paperwork must also accompany the request.

The fee is \$24 for the first certified copy and \$7 for each additional certified copy made at the same time.

FULL BIR I II NAIVIE		
DATE OF BIRTH:		
MOTHER'S NAME (including maiden name):	
FATHER'S NAME:_		
RELATIONSHIP TO	PERSON:	NUMBER OF CERTIFIED COPY(S):
SIGNATURE OF RE	QUESTOR:	
A death record may authorized agent.		ersonal or property right interest in the record or by his dure reach additional certified copy made at the same time.
FULL NAME:		
DATE OF DEATH: _	PLACE OF DEATH	
RELATIONSHIP TO	DECEASED / INTENDED PURPOSE	NUMBER OF CERTIFIED COPY(S):
SIGNATURE OF RE	QUESTOR:	
A FULL marriage re		e / partner. The front of the marriage license is public recorer each additional certified copy made at the same time.
PARTNER A / GROO	OM NAME	
		NUMBER OF CERTIFIED COPY(S)
A Cashier's Chec	documents must accompany this	amount, payable to Grundy County Clerk and any supporting request in order for it to be processed.
Credit Card reque	ests can be submitted to <u>vitals@grund</u>	ycountyil.gov, please include "Request" in the subject lin
MAIL CERTIFIED CO	OPIES TO: NAME	
ADDRESS		CITY
STATE	ZIP	PHONE