

ELKHART COUNTY VITAL RECORDS

608 OAKLAND AVE ELKHART, IN 46516 (574) 523-2107 p (574) 523-2162 f

Of Copies:_ Receipt #___

CC Receipt#

Application for Genealogy Birth Record

IDENTIFICATION IS REQUIRED

elkhartcountyhealth.org/vitalrecords

NO REFUNDS

*Applications can be dropped of	off or mailed in. If a	vailable, record(s) will be returne	ed by mail.
1. Full name at Birth			
2. Place of Birth (City or Hospi	tal)		
3. Date of Birth			
4. NAME OF MOTHER			
5. NAME OF FATHER:			
Applicant's Signature:		Telephone () -	
Home Address		City and State	Zip
Office use only: Date: Paid: CashCert.Ck MOCard	GENE	ALOGY: \$6.00 each	
By: Cortified: \$11.00 additional cortified \$0.00			00 02 bo

Certified: \$11.00 additional certified \$9.00

Records begin in 1882

ACCEPTABLE FORMS OF PAYMENT:
NO CHECKS

CASH+ (No bills larger than \$20), Cashier's Check, Money order *Visa, MasterCard, and Discover accepted in office only *service fee charged + please do not send cash through the mail