☐ COUNTER
☐ MAIL

MARICOPA COUNTY DEPARTMENT OF PUBLIC HEALTH

APPLICATION FOR CERTIFIED COPY OF BIRTH CERTIFICATE

☐ $15.00 Each Copy
☐ $25.00 Paternity/Corrections from 1997 to present

TODAY'S DATE	ENCLOSED$_____ IN _____ FOR _____ CERTIFIED COPIES AMOUNT CASH, CHECK, ETC # OF COPIES
CHILD'S FULL NAME AT BIRTH	FIRST MIDDLE LAST
DATE OF BIRTH	MONTH DAY YEAR
PLACE OF BIRTH	TOWN OR CITY COUNTY HOSPITAL
FATHER'S NAME	FIRST MIDDLE LAST
PLACE OF BIRTH	STATE OR COUNTRY
MOTHER'S MAIDEN NAME	FIRST MIDDLE LAST
PLACE OF BIRTH	STATE OR COUNTRY
RELATIONSHIP TO PERSON NAMED IN CERTIFICATE	SIGNATURE
TELEPHONE NUMBER	ID TYPE, # & EXP. DATE (FOR OFFICE USE ONLY)

FOR OFFICE USE ONLY
DATE ISSUED
SFN
ATS DATE:
T R X #

▼ PRINT OR TYPE NAME AND MAILING ADDRESS ▼

YOUR NAME	
MAILING ADDRESS STREET OR P.O. BOX	
CITY AND STATE	ZIP CODE

Make check/money order payable to and mail to:
Maricopa County
Office of Vital Registration
P.O. Box 2111
Phoenix, Arizona 85001
(602) 506-6805

If applying in person, we are located at 3221 N. 16th Street, Suite #100, Phoenix, Arizona 85016

081-2515 R03/09

SUBSCRIBED AND SWORN TO OR AFFIRMED BEFORE ME THIS _____ DAY OF _____ 20 _____

NOTARY'S SIGNATURE

MY COMMISSION EXPIRES: _____

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IF APPLYING IN PERSON, A VALID GOVERNMENT PICTURE ID IS REQUIRED
If applying by mail, have application notarized or include a copy of your ID.

Credit\Debit Card MC ☐ or Visa ☐ Exp. Date MM\YY

If mailing in your application & paying by check, a copy of a VALID GOVERNMENT PICTURE ID must be provided by the person signing.
WARNING: False application for a birth certificate is a punishable offense.

See Reverse Side

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Maricopa County Office of Vital Registration
Would Like to Invite You to Apply With Our Office

There are several reasons why one should apply as soon as possible and they are: Social Security Card and Number, Passport and Traveling Purposes, Medical Benefits and Insurance, Child Care, School and Income Tax Purposes.

Our office may issue certified copies of birth certificates from 1950 to the present. In addition, our office also processes corrections, amendments, certified copies of court ordered name changes, paternities and "Voluntary Acknowledgements of Paternity" on birth certificates which occurred from 1997 to the present. The fee for a certified copy of a birth certificate is $15.00. The fee for a correction, amendment or paternity is $25.00. Please note: You must have valid government issued picture ID, if applying in person.

The Maricopa County Office of Vital Registration is located at 3221 N. 16th ST. #100 Phoenix, AZ 85016. We are open Monday thru Friday from 8:00 A.M. to 4:30 P.M. Call us at (602) 506-6805.

Review the following checklist before mailing:

- If mailing your application and paying by money order or check, please make it payable to the Maricopa County Office of Vital Registration. Do not send cash. If you choose to pay with a credit card, please write complete number and expiration date in the appropriate area.
- Make sure to submit a clear photocopy of your valid government issued picture ID or a notarized application. If your signature or the expiration date is on the back of ID, please make photocopy of the back also.
- Make sure that the application is completed and signed before it is mailed. The signature on the application and ID being submitted with the completed application should be the same. We do accept valid Consulate Identification Cards as a form of ID. (Example: the Matricula Consular) For more information, please contact us at (602) 506-6805.

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