



Application for Vital Records Copy

Lynne Johnson, Forsyth County Register of Deeds

201 N Chestnut St, Winston-Salem, NC 27101

336-703-2700

Certified Copy - \$10.00 each (official copy with seal)

Non-certified copy - .50 each (unofficial copy no seal)

Payment - Cashier's Check, Money Order - NO PERSONAL CHECKS - DO NOT SEND CASH

Enclose a self-addressed stamped envelope

Circle One

Birth Certificate	Certified	Uncertified	#of Copies
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Full Name at Birth: _____

Date of Birth: _____

Full name Parent 1: _____

Full Name Parent 2: _____

Death Certificate

Full Name of Deceased: _____

Date of Death: _____

Marriage Certificate

Full Name Applicant 1: _____

Full Name Applicant 2: _____

Date of Marriage: _____

The certificate requested is for: (Circle One)

- | | |
|-----------------------------|---|
| 1. Myself | 6. Grandchild/Great-Grandchild |
| 2. Spouse | 7. Grandparent/Great Grandparent |
| 3. Child/Stepchild | 8. I am seeking information of legal determination of personal property rights. |
| 4. Brother/Sister | 9. I am authorized agent, attorney, or legal representative (proof required) |
| 5. Mother/Father/Stepparent | |

I hereby certify that all of the above information is true to the best of my knowledge and belief. NOTE; It is a Class I felony to give false statements to obtain a certified copy of a vital record. NC General Statute 130A-93,99.

Applicant's Signature _____ Telephone # _____

Mailing Address _____ City, State, Zip Code _____