



Karen J. Bluhm

Osceola County Clerk

301 West Upton Avenue • Reed City, Michigan 49677

Tel: (231) 832-3261 • Fax: (231) 832-6149

**APPLICATION FOR A CERTIFIED COPY OF A
BIRTH RECORD**

1. Name at Birth: _____
First Middle Last

2. Date of Birth: _____

3. Place of Birth: _____
Hospital (if known) City County

4. Mother's MAIDEN Name: _____

5. Father's Name _____

6. Are you the person named on Line 1 above? (check one) _____ Yes, _____ No
If No, what is your relationship to the person in Line 1? (Must be a parent named
in the birth record, or a legal representative or legal guardian.

7. Applicant's Name: _____
Street: _____
City, State, Zip: _____

Applicant's Signature: _____
Phone: _____
Date: _____

Cost per request for Certified Copy is \$9.00 Additional copies of the same record ordered at the same time
is \$3.00 each.

Must enclose a copy of Photo ID

MAKE CHECK OR MONEY ORDER PAYABLE TO: OSCEOLA COUNTY CLERK

Please send the following:

____ Certified Copy \$9.00 ____ Additional Copies of Same Record \$3.00

OR

VISIT THE WEBSITE: www.vitalchek.com to pay by Debit or Credit Card

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832-6101

Vital Records
832-6104

Circuit Court
832-6103