

BIRTH

INFORMATION: Birth records are maintained in the Stanislaus County Vital Records office for the current year and one year previous.

INSTRUCTIONS FOR OBTAINING A BIRTH CERTIFICATE

1. If you are requesting a certified Informational Copy, complete only the Applicant Information and Birth Certificate Information portions of this form. If you are requesting a regular an Authorized Certified Copy, complete the entire form.
2. If you submit your order in person, you must sign a sworn statement in the presence of Vital Records staff.
3. If you submit your request by mail, you must complete the attached statement and sign it in the presence of a Notary Public.
4. Use a separate application form for each different record of birth for which you are requesting a certified copy (if submitting your request by mail, remember to identify each certificate requested on the sworn statement).
5. Complete the Applicant Information section and provide your signature where indicated. Give all the information you have available to identify the record of the registrant in the spaces under Birth Certificate Information. If the information you furnish is incomplete or inaccurate, it may be impossible to locate the record. If the registrant has been adopted, please make the request in the adopted name.
6. Submit \$28.00 for each certified copy requested. If no record of the birth is found, the \$28.00 fee may be retained for searching as required by statute and a Certificate of No Public Record will be issued. If you are mailing your request, indicate the number of certified copies you wish and include sufficient money with this application, in the form of a personal check, postal or bank money order (International Money Order only for out-of-country requests) made payable to Vital Records. Mail this application with the fee(s) to:

Vital Records
820 Scenic Drive, Suite 21
Modesto, CA 95350

Statement of Oath

4. I, _____ am the _____, swear
Your Printed Name Your relationship to registrant
under penalty of perjury that I am an authorized person, as defined in California Health and Safety Code Section 103525 (c) and am eligible to receive the authorized certified copy(s) of the birth record identified on the application form.

Sworn: _____ At: _____
Date City, State

Signature: _____

Note: If submitting your order by mail, you must have your Sworn Statement notarized using the Certificate of Acknowledgment below. The Certificate of Acknowledgment must be completed by a Notary Public. (Law enforcement and local and state governmental agencies are exempt from the notary requirement.)

CERTIFICATE OF ACKNOWLEDGEMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of _____)
County of _____)

On _____ before me, _____, personally appeared
(here insert name and title of the officer)

_____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.
(SEAL)

SIGNATURE