

**BRENDA BRITTON
CLAY COUNTY CLERK
P.O. BOX 160
LOUISVILLE, IL 62858
1-618-665-3626**

APPLICATION FOR SEARCH OF DEATH RECORD FILES

CERTIFIED COPY OF DEATH RECORD

\$20.00 each
\$11.00 for additional Certified Copies

REQUESTING # _____ of Copies

AMOUNT ENCLOSED \$ _____

GENEALOGICAL COPIES

The death record **MUST** be on
file for at least 20 years

\$5.00

REQUESTING # _____ of Copies

AMOUNT ENCLOSED \$ _____

SUBMIT A COPY OF YOUR CURRENT PHOTO ID

FULL NAME OF DECEASED	First	Middle	Last
PLACE OF DEATH	Hospital	City or Town	County State
DATE OF DEATH	Month	Day	Year
	Sex	Race	Occupation Social Security Number
DATE LAST KNOWN TO BE ALIVE	Month	Day	Year
LAST KNOWN ADDRESS	MARITAL STATUS		
DATE OF BIRTH	Month	Day	Year BIRTHPLACE City State
NAME OF PARTNER			
NAME OF HUSBAND/WIFE/ PARTNER			
FULL NAME OF PARENT OF DECEASED		FULL MAIDEN NAME OF PARENT OF DECEASED	

APPLICATION MADE BY

NAME (written signature)

STREET ADDRESS

CITY STATE ZIP

YOUR RELATIONSHIP TO PERSON

MAIL TO COPY (if other than applicant)

Name

STREET ADDRESS

CITY STATE ZIP

INTENDED USE OF DOCUMENT

