

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

APPLICATION FOR SEARCH OF BIRTH RECORD

CERTIFIED COPY OF BIRTH RECORD

\$16.00 each

\$7.00 for each additional certified copy

REQUESTING # _____ OF COPIES

AMOUNT ENCLOSED \$ _____

GENEALOGICAL COPIES

The birth record **MUST** be on
file for at least 75 years

\$5.00

REQUESTING # _____ OF COPIES

AMOUNT ENCLOSED \$ _____

SUBMIT A COPY OF YOUR CURRENT PHOTO ID

FULL NAME:	FIRST	MIDDLE	LAST	
DATE OF BIRTH:	MONTH	DAY	YEAR	GENDER
PLACE OF BIRTH:	HOSPITAL	CITY	COUNTY	STATE
PARENT NAME:	FIRST	MIDDLE	LAST	
PARENT NAME:	FIRST	MIDDLE	LAST	

APPLICATION MADE BY:

NAME (written signature)

STREET ADDRESS

CITY STATE ZIP

YOUR RELATIONSHIP TO PERSON

MAIL COPY TO (if other than applicant):

NAME

STREET ADDRESS

CITY STATE ZIP

INTENDED USE OF DOCUMENT

**NOTE: Birth Certificates are confidential records and copies can only be issued to persons entitled to receive them.
The application must indicate the requester's relationship to the person and the intended use of the document.**