



LAFAYETTE COUNTY HEALTH DEPARTMENT
547 SOUTH 13 HIGHWAY
LEXINGTON, MO 64067-1437
APPLICATION FOR COPY OF BIRTH OR DEATH CERTIFICATION

Missouri law requires a fee for a search of the files. Applicant will receive one (1) certified copy if record is found.

****Certified copies are computer generated and are valid for all legal purposes.**

FEE MUST ACCOMPANY APPLICATION

Cash or money order payable to:

Lafayette County Health Department

547 South 13 Highway

Lexington, MO 64067

Phone: (660) 259-4371

Statewide recording of birth and death records began January 1, 1910

TYPE OR PRINT ALL ITEMS EXCEPT SIGNATURES

BIRTH _____ *(Quantity)*

A \$15.00 fee is required for each search for a birth certificate. If the record is found, one (1) certified copy will be provided. There is a \$15.00 fee for each additional copy of the same record. *Computer Generated Copies Available From 1920 to Present.*

NAME ON CERTIFICATE (FIRST) (MIDDLE) (LAST)

ALSO KNOWN AS (INDICATE IF BIRTH COULD BE RECORDED UNDER ANOTHER NAME)

DATE OF BIRTH (MONTH) (DAY) (YEAR)

PLACE OF BIRTH (CITY) (COUNTY) (STATE)

HOSPITAL SEX RACE

FATHER'S NAME (FIRST) (MIDDLE) (LAST)

MOTHER'S NAME (FIRST) (MIDDLE) (MAIDEN)

DEATH _____ *(Quantity)*

A \$13.00 fee is required for each search of the files for a death certificate. If the record is found, one (1) certified copy will be provided. There is a \$10.00 fee for each additional copy of the same record ordered at the same time. *Computer Generated Copies Available From 1980 to Present.*

NAME ON CERTIFICATE (FIRST) (MIDDLE) (LAST)

PLACE OF DEATH (CITY) (COUNTY) SEX

DATE OF DEATH (MONTH) (DAY) (YEAR) RACE

DATE OF BIRTH AGE SS# (IF KNOWN)

SPOUSE'S NAME (FIRST) (MIDDLE) (LAST)

FATHER'S NAME (FIRST) (MIDDLE) (LAST)

MOTHER'S NAME (FIRST) (MIDDLE) (MAIDEN)

PLEASE ENCLOSE A SELF ADDRESSED STAMPED ENVELOPE WITH YOUR REQUEST

YOUR SIGNATURE

DAYTIME PHONE

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ADDRESS (STREET OR P.O. BOX) (CITY)

(STATE) (ZIP)

PURPOSE FOR WHICH CERTIFIED COPY IS TO BE USED

YOUR RELATIONSHIP TO PERSON NAMED ON CERTIFICATE (SELF, MOTHER, SPOUSE, ETC.) (IF LEGAL GUARDIAN, MUST PROVIDE GUARDIANSHIP PAPERS)

IF LEGAL REPRESENTATIVE -- INDICATE LEGAL RELATIONSHIP

WARNING: False application for a certified copy of a valid record is a crime.