

OFFICE USE ONLY:Certificate #
_____**CHILDRESS COUNTY***Tiffany Howard*

PLEASE PRINT, INCLUDE A PHOTOCOPY OF YOUR VALID PHOTO ID AND SWORN STATEMENT WHEN SENDING THE REQUEST. Make check or money orders payable to: Childress County Clerk.

Birth Certificate

Type	Cost X	# of Copies	Total
Certified Copy	\$23.00		
		Total	

Death Certificate

Type	Cost X	# of Copies	Total
Certified Copy (First)	\$21.00		
Additional Copy	\$4.00		
		Total	

Birth/Death Record Information

Full Name of Person on Record	First Name	Middle Name	Last Name
Date of Birth/Death	Month	Day	Year
Place of Birth/Death	City of Town	County	State
Full Name of Parent 1	First Name	Middle Name	Last Name
Full Name of Person 2	Full Name	Middle Name	Last Name

Requestor Information

Requestor Name	Telephone#	Email Address
Full Mailing Address	Street Address	City
	State	Zip
Relationship to person listed above	Purpose for obtaining record:	

WARNING: IT IS A FELONY TO FALSIFY INFORMATION ON THIS DOCUMENT. THE PENALTY FOR KNOWINGLY MAKE A FALSE STATEMENT ON THIS FORM OR FOR SIGNING A FORM WHICH CONTAINS A FALSE STATEMENT IS 2 TO 10 YEARS IMPRISONMENT AND A FINE UP TO \$10,000 (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003)

Your Signature _____ Date of Application _____

APPLICATIONS WITHOUT PHOTO ID AND A SIGNED SWORN STATEMENT WILL NOT BE PROCESSED.

Childress County Clerk
Courthouse Box 4
Childress, Texas 79201

AFFIDAVIT OF PERSONAL KNOWLEDGE

THIS SECTION MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC

STATE OF _____

COUNTY OF _____

Before me on this day appeared _____
(Name)

Now residing at _____
(Address) (City) (State) (Zip)

Who is related to the person named in Item1 as _____ and whom oath de-
poses and says that the contents of this affidavit signed by me and that the statements are true and correct.

Signature _____

Sworn to and subscribe before me this _____ date of _____, 20 _____

(SEAL)

Printed Name of Notary

Signature of Notary
