

**County of Blanco
P.O. Box 65
Johnson City, Texas 78636**

Application For Certified Copy Of Birth Or Death Certificate

(Only qualified persons may purchase certificate: Self, Grandparent, Child, Spouse, Brother, Sister, Guardian, or Conservator)

_____ # of Death Certificates (\$21.00 – 1st Copy & \$4.00 for each additional copy)

_____ # of Birth Certificates (\$23.00 each copy)

PLEASE PRINT

1. Name of Person: _____
First _____ Middle _____ Last _____

2. Date of Birth _____ or Date of Death _____

3. Father's Name _____
First _____ Middle _____ Last _____

4. Mother's Name _____
First _____ Middle _____ Last _____

WARNING: Penalty for knowingly making a false statement in this form can be 2-10 years in prison and a fine of up to \$10,000.00 (Health and Safety Code, Chapter 678, Sec. 195.003)

5. Applicant's Name _____ Telephone # _____

6. Mailing Address: _____

7. Relationship to Person Named in Item #1: _____

8. Purpose for Obtaining this Certificate: _____

Signature of Applicant _____ Date: _____

THE SEARCHING OR INDEXING FEE IS NON-REFUNDABLE EVEN IF A RECORD IS NOT FOUND. DEATH RECORDS ARE CONFIDENTIAL FOR 25 YEARS AND BIRTH RECORDS ARE CONFIDENTIAL FOR 75 YEARS. THEREFORE, ISSUANCE IS RESTRICTED. PLEASE ATTACH A PHOTOCOPY OF ID TO APPLICATION.