



Rachel Lamb Geeslin, County Clerk/Local Registrar, Hamilton County

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APPLICATION FOR CERTIFIED COPY OF BIRTH OR DEATH CERTIFICATE

BIRTH- NUMBER REQUESTED

_____ \$23.00 Short Form Abstract (All Texas Births)

_____ \$23.00 Long Form (Hamilton County Births Only)

DEATH- NUMBER REQUESTED (Hamilton County Deaths Only)

_____ \$21.00 First Certified Copy

_____ \$4.00 Each Additional Copy

(Accepted forms of payment include: Cash, Check or Money Order) Debit/Credit \$3.00 minimum or 3% convenience fee applies for card payments

➤ PLEASE PRINT ALL INFORMATION AND PRESENT VALID GOVERNMENT ISSUED PHOTO ID.

1.Full Name of Person on Record	First/Nombre	Middle/Nombre	Last (Maiden/Suffix)/ Apellido	
2.Date of Birth or Death	Month/ Mes	Day/Día	Year/Año	Sex/Sexo
3.Place of Birth or Death	City or Town	County	Texas	
4.Full Name of Parent 1	First	Middle	Last (Maiden/Suffix)	
5.Full Name of Parent 2	First	Middle	Last (Maiden/Suffix)	

6. Applicant's Name: _____ 7. Phone Number _____

8. Mailing Address: _____
Street Address City State Zip

10. Relationship to Person on Record: _____ 11. Purpose for obtaining this record: _____

WARNING: IT IS A FELONY TO FALSIFY INFORMATION ON THIS DOCUMENT. THE PENALTY FOR KNOWINGLY MAKING 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 OF UP TO \$10,000. (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003)

Signature of Applicant

Date

FOR OFFICE USE ONLY			
Deputy _____	Certificate # _____	Type of ID _____	ID# _____