## STATE OF WYOMING

## APPLICATION FOR CERTIFIED COPY OF DEATH CERTIFICATE

A request for a certified copy of a death certificate should be submitted on this form along with the fee of \$5.00 per copy. If the date of death is unknown, a searching fee of \$8.00 for every five (5) years searched is charged, which includes either a certified copy or verification of the record if one is found. A money order or personalized check from the person making the request should be made payable to **VITAL STATISTICS SERVICES**. If a record is not located, your fee will be retained as a searching fee.

Please enclose a self-addressed stamped envelope with

the application.

Enclosed is \$	for	certif	ied copy/copies.	
Full Name of Dec	ceased			
First Name _				
Middle Name _				
Last Name _				
Date of Occurren	ice	/		
Place of Occurre	nce			
City	or (	County_		
Name of survivir	ng spouse at	t time of	death ( <i>If applica</i>	ble)

Wyoming is a closed record state and proof of relationship to the Deceased is required unless the applicant is named on the certificate as spouse, parent and/or informant. Rules allow issuance to other family members or an attorney to settle estates and other legal matters. Applicants will need to submit proof of the matter along with this application. Failure to submit proof will result in processing delays.

Relation to Deceased and Purpose for which required.	the copy is		
Relation_			
Purpose			
Signature of Applicant			
X			
Applicant Address (REQUIRED)			
	-		
	-		
	_		

## PHOTOCOPY OF CURRENT IDENTIFICATION

## Written signature must be a permanent part of the ID

Mail your request with a self-addressed,
stamped envelope to:

Vital Statistics Services Hathaway Building Cheyenne, WY 82002