Application for Genealogy Birth Record

ELKHART COUNTY
VITAL RECORDS
608 OAKLAND AVE
ELKHART, IN 46516
(574) 523-2107 p
(574) 523-2162 f
elkhartcountyhealth.org/vitalrecords

IDENTIFICATION IS REQUIRED

NO REFUNDS

*Applications can be dropped off or mailed in. If available, record(s) will be returned by mail.

1. Full name at Birth __________________________________________

2. Place of Birth (City or Hospital) _____________________________

3. Date of Birth ________________________________

4. NAME OF MOTHER ________________________________________

5. NAME OF FATHER: ________________________________________

Applicant’s Signature:________________________________________

Telephone (______) -

Home Address

City and State

Zip

Office use only:
Date:___________
Paid: Cash___Cert.Ck___MO___Card___
By:______________
# Of Copies:__________
Receipt #__________
CC Receipt#__________

GENEALOGY: $6.00 each

Certified: $11.00 additional certified $9.00

Records begin in 1882

ACCEPTABLE FORMS OF PAYMENT:

NO CHECKS

CASH+ (No bills larger than $20), Cashier’s Check, Money order
*Visa, MasterCard, and Discover accepted in office only
*service fee charged
+ please do not send cash through the mail