Application For Certified Copy of Public Vital Records

Check only one of the two following categories. Please print information clearly.
1. ___ Orleans Parish/Statewide birth record (birth over 100 years ago)*
   **or**
2. ___ Orleans Parish/Statewide death record (death over 50 years ago)*

<table>
<thead>
<tr>
<th>Name (First, Middle, Last)</th>
<th>Date (If unknown, indicate three year span to be researched)</th>
<th>Volume (if known)</th>
<th>Page (if known)</th>
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City                       Parish

3. ___ Orleans Parish marriage record (marriage over 50 years ago)**

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<tr>
<th>Groom’s Name (First, Middle, Last)</th>
<th>Date (If unknown, indicate three year span to be researched)</th>
<th>Volume (if known)</th>
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Bride’s Name (First, Middle, Maiden Name)

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<th>Date (If unknown, indicate three year span to be researched)</th>
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Submit check or money order to: Secretary of State Vital Records P.O. Box 94125 Baton Rouge, LA 70804-9125

**Please do not send cash!**
Phone 225.922.2012 for assistance

NOTE: Limit Ten (10) Requests Per Mailing

Name: _______________________________________________________
Address: ____________________________________________________
City / State / Zip Code: _______________________________________
Telephone number (day) including area code: ______________________
Number of copies requested: ______  Total fees due ($5 each): _______

For current records, such as births less than 100 years, deaths less than 50 years and Orleans marriages less than 50 years, please contact:
Department of Health and Hospitals Vital Records Registry P.O. Box 60630 New Orleans, LA 70160

Email: _dhh-vitalweb@la.gov
Phone 504.593.5100 or visit their website at www.ldh.la.gov

LFP 3 (Rev 10/19)