

APPLICATION FOR A VITAL RECORD

Certified copies cost \$10.00 each

Cash or checks accepted

Please make checks payable to *Brattleboro Town Clerk*

Instructions for requesting a vital record by mail:

Print this form and complete. Please write clearly.

Enclose form, self-addressed stamped envelope and fee.

Mail To:

Brattleboro Town Clerk's Office

230 Main Street, Suite 108

Brattleboro, VT 05301-2558

I am requesting a (circle one of the following: **Birth, Marriage, Civil Union, or Death**)

Certificate for (name(s) on Certificate) _____ that

happened on (date) _____. The person named above is my (circle one)

Self, Spouse, Child, Mother, Father, Sister, Brother, Grandchild,

Grandparent, Other (if other explain) _____ who needs the

certificate for (circle one) **Job, Driver's License, Travel, School, Insurance,**

Estate, Other: _____

Person filling out this request:

Name: _____

Address: _____

Phone or e-mail address: _____

SIGNATURE: _____

DATE: _____