Morgan County Health Department 180 S. Main St., Suite 252, Martinsville IN 46151

This office has birth records occurring in Morgan County ONLY.

Warning: False applications, altering, mutilating or counterfeiting Indiana birth certificates is a criminal offense under IC 16-1-19-6.	Please complete all items below:				Certificate # Date			
1. Full Name at Birth:								
2. Birthdate: Month	Day Yea			ear_		Age	Sex	
3. Birthplace: City County								
4. Has this person been adopted? If so, new name:	_				_			
6. Name of Father					State of Birth:			
7. Full <u>Maiden</u> Name of Mother					State of Birth:			
8. How are you related to pers	on or	line 1?		_ 9.	Record	to be use	d for	
10. Signature					_ Telephone #			
11. Address		City			State		Zip	
ype of Certificate	Qty	Price Each	Total Amt			Provide	e One Piece of ID	
et includes Full & Wallet Size		\$18.00				Dri	ver's License	
rotective Vinyl Sleeve/ Full		2.00			State ID, Military, School ID or			or
rotective Vinyl Sleeve/ Wallet		2.00			Passport			
Total								
						Photo an	n of ID with your d signature on it. COPIES ONLY	
Check or money order may be address listed above. Please de	o not	send cash	through	the 1	mail.			
Print name and address of the Name Address City/State/2							•	