

Calhoun County Clerk and Register of Deeds
 315 W. Green St., Marshall, MI 49068
 (269) 781-0718 - Fax (269) 781-0721

DEATH CERTIFICATE REQUEST FORM

FULL NAME OF DECEASED

Please Print

Date of Death: _____	City/Twp./Village of Death: _____
Number of copies Requested: _____ 1 Certified Copy.....\$10.00 Add'l. copies of <u>same</u> record....\$ 5.00 (each) Fax Fee(if request is faxed to us).....\$ 3.00 Funeral Home mail fee(no fax fee)..\$ 5.00 Total \$ _____	Method of Payment: Cash _____ Check _____ Credit Card _____
Applicant's Signature: _____ Today's Date: _____	IF CREDIT CARD: SERVICE FEES APPLY VISA _____ MASTER CARD _____ CARD# _____ EXP.DATE _____ SECURITY CODE: _____ Cardholders _____ Signature _____

NOTE: **If exact year is unknown, please estimate within 5 years.**
If NO date is known, you will be instructed on how to research the records.

***** **REQUIRED** *****

Return Address Information: Name _____
 (Please Print)

Mailing Address _____

Daytime Phone # _____

PLEASE INCLUDE A SELF-ADDRESSED STAMPED ENVELOPE