

**State of New Hampshire
Department of State
Division of Vital Records Administration**

Documentary Evidence for Individuals Not Possessing an Acceptable Photo Identification

I declare that I do not have Picture Identification and that I have presented **TWO ATTACHED** documents that have been accepted by the State/Local Office of Vital Records. By signing below, I acknowledge and swear that the supporting documentation presented to prove my identity and address are true and accurate to the best of my knowledge and belief.

Please **PRINT** the following information:

Name of Applicant

Applicant's Residence Address (house number, street name, city/town, state, zip code)

Signature of Applicant

Date

Instructions for Issuing Clerk:

Please check off any **TWO** (or any one item twice) from the list below.

ATTACH a photocopy of **BOTH** documents to this form. The names and addresses on both of these documents as well as the name and address on the Application Form **MUST** match.

Utility bills

Social Security Card/DD-214

Car registration

Hospital Birth Worksheet

Copy of income tax return

Lease/rental agreement

Personal check with address

Pay stub/W-2

Previously issued vital record/marriage license

Voter Registration Card

Letter from government agency requesting a vital record, e.g. DHS, WIC

Personally known to me: _____
Signature of issuing Clerk

Other: _____
Description

DVRA Approval Signature: _____

***Penalty for perjury is a class B felony with a maximum sentence of imprisonment not to exceed seven (7) years and/or a fine not to exceed Four Thousand Dollars (\$4,000.00)**