

## **Town of Barnstable**

## **Office of Town Clerk**

367 Main Street, Hyannis MA 02601

Office: 508-862-4044 Fax: 508-790-6326 Ann M. Quirk, CMC, CMMC, MMC Town Clerk

## REQUEST FOR VITAL RECORD

In order to request a birth, death, or marriage certificate, please fill in the appropriate section below; sign this form at the bottom; then send this completed form to the address listed above with;

- A check for \$10.00 for each certificate dated from 1910 to the present;
- OR a check for \$20.00 for each certificate dated from 1630 1910;
- A photocopy of your driver's license; and
- A self-addressed stamped envelope.

I WISH TO REQUEST A BIRTH	CERTIFICATE FOR:	Name of Child
WHO WAS BORN IN THE TOW	N OF BARNSTABLE ON:	Date
NAME OF FATHER/PARE	ENT (IF KNOWN):	
NAME OF MOTHER/PAR	ENT (IF KNOWŃ):	· · · · · · · · · · · · · · · · · · ·
I WOULD LIKE	COPY/COPIES OF SAID DO	OCUMENT.
I WISH TO REQUEST A DEATH	I CERTIFICATE FOR:	
WHO DIED IN THE TOWN OF B	ARNSTARI F ON:	Name of Decedent
WHO DIED IN THE TOWN OF B	TAIT (IE KALONANI)	Date of Death
NAME OF FATHER/PARE NAME OF MOTHER/PAR	ENT (IF KNOWN) ENT (IF KNOWN)	<del></del>
I WOULD LIKENumber of Copies	COPY/COPIES OF SAID D	OCUMENT.
I WISH TO REQUEST A MARRI	AGE CERTIFICATE FOR	
andParty B's Name	who were married on:	Party A's Name
Party B's Name		Date of Marriage
I WOULD LIKENumber of Copies	COPY/COPIES OF SAID DO	DCUMENT
NOTE: Marriages are recorded got married.	d where the partners applied f	or their license NOT where they
Name of requestor:		
	Please Print	
Signature of requestor:		(tel #)