

KIOWA COUNTY PUBLIC HEALTH P.O. Box 414 1309 Maine Street Eads, CO Phone (719) 438-5782

Application for Certified Copy of Death Certificate

interest in the record requested. The penalties for obtaining a record under false prefinction of fine of not more than \$1,000, or imprisonment in the county jail for not more than one year or both such fine imprisonment. By signing below, I have read and understood that there are penalties for obtaining a record under false pretenses. All requests muccompanied by a copy of the requestor's identification before processing. PLEASE RETI RN YOUR REQUEST WITH A PHOTOCOPY YOUR DRIVERS LICENSE, STATE ID OR PASSPORT. Full list of Primary and Secondary Identification listed on other side. Signature of person making request X Drivers License # State of License Expiration Date Address City State Zip Daytime Phone () Apply in person for same day, service. Cash and money orders accepted, Mell in request. Certificate will be mailed within threa-four business days. Genealogy request will be mailed within two weaks, For genealogy request will be mailed within two weaks, For genealogy request will be mailed within two weaks, For genealogy requested to search of files when no record is found). \$13.00 for each additional copy ordered at the same time, for the same certificate. For genealogy purposes, if the year is unknown, therefore the initial \$20.00 fee plus \$1.00 for every year requested to search thereafter. ake money order payable to Vital Records. Please do not send cash through the mail. No checks or cred	Full name of deceased	First	M	iddle	L	Last	
Reason for Request Pursuant to Colorado Revised Statutes, 1982, 25-2-118 and as defined by Colorado Board of Health Rules and Regulations, approach have a direct and tangible interest in the record requested. The penalties for obtaining a record under false preducted a fine of not more than \$1,000, or imprisonment in the county jail for not more than one year or both such fine myrisonment. The signification of the requestor's identification before processing. PLEASE RETURN YOU'R REQUEST WITH A PHOTOCO REYOUR DRIVERS LICENSE, STATE ID OR PASSPORT. Full list of Primary and Secondary Identification listed on other side. Signature of person making request X Drivers License # State of License Superior Processing Please Superior Processing Apply in person for same day, service. Cash and money orders accepted. Mail in equest. Certificate will be mailed within three-four business adays. Considery inquest will be mailed within three-four business adays. For genealogy research, some records are svallable from years 1882-1898. S200 District copy for search of files when no record is bound, fective \$13,00 for each additional copy ordered at the same time, for the same certificate. For genealogy purposes, if the year is unknown, that the initial \$20,00 feep plus \$1.00 for every year requested to search three-after. Identification and Proof of Relationship is Required Office Use Only! Today's Date Number of Copies Total Amt Paid \$ BN#	Date of death	Month	Da	y Year	Age at Death	State of Birth	
Pursuant to Colorado Revised Statutes, 1982, 25-2-118 and as defined by Colorado Board of Health Rules and Regulations, approach the part of p	Place of death	City	Co	unty	<u>,</u>	State of Death	
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