

DESIGNATION

I request that the Tom Green County Clerk's office allow

to obtain a certified copy of the following birth/death record on my behalf:

The information on the certificate:

Name: _____

Date of event: _____

Place of event: _____

Father's full name: _____

Mother's Full Maiden Name: _____

I am related to the person on the certificate as: _____

The purpose for which the certified copy is needed: _____

Signature: _____

THE STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned authority, on this day personally appeared

Known to me to be the person whose name is subscribed on the foregoing instrument, and acknowledged to me that they executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE on this day ____ of _____, _____.

Notary Signature _____

Printed Name of Notary _____

My commission expires on _____

PLEASE ATTACH A PHOTOCOPY OF YOUR IDENTIFICATION (DRIVERS LICENSE, TEXAS I.D. CARD, ETC.) THE RECORD CANNOT BE RELEASED WITHOUT PROOF OF YOUR IDENTITY. THE PERSON YOU HAVE DESIGNATED TO OBTAIN A CERTIFIED COPY MUST ALSO PRESENT IDENTIFICATION.

CHRISTINA UBANDO, COUNTY CLERK
TOM GREEN COUNTY, TEXAS
124 WEST BEAUREGARD
SAN ANGELO, TEXAS 76903
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FAX: (325) 659-6521
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