SHELLI MILLER
ROCKWALL COUNTY CLERK
1111 E. Yellowjacket Lane, Suite 100
Rockwall, TX 75087
(972) 204-6300

☐ **BIRTH CERTIFICATES**
Certified Copy - $23

☐ **DEATH CERTIFICATES**
Certified Copy $21 & $4 for each additional

(Acceptable forms of payment include cash, credit/debit or money order. No personal checks.)

1. Full Name of Person on Record	First	Middle		Last
2. Date of Birth/ Death	Month	Day	Year	Gender ☐ Male ☐ Female
3. Place of Birth/ Death	City / Town	County		State
4. Full Name of Parent 1	First	Middle		Last (Maiden)
5. Full Name of Parent 2	First	Middle		Last (Maiden)

6. YOUR NAME _____ 7. TELEPHONE (____)_____ HOME/CELL

8. MAILING ADDRESS: _____
Street Address City State Zip

9. RELATIONSHIP:
SELF PARENT CHILD GRANDPARENT SPOUSE OTHER: _____

10. PURPOSE FOR OBTAINING THIS RECORD:
SCHOOL PASSPORT DRIVERS LICENSE SOCIAL SECURITY TRAVEL NEWBORN ID OTHER: _____

NOTE: This office is not responsible for any errors made on the original Birth Certificate or Death Certificate. All corrections must be made through The State Bureau of Vital Statistics in Austin, TX.
An incomplete application will not be processed.

WARNING: IT IS A FELONY TO FALSIFY INFORMATION ON THIS DOCUMENT. THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT ON THIS FORM OR FOR SIGNING A FORM WHICH CONTAINS A FALSE STATEMENT IS 2 TO 10 YEARS IMPRISONMENT AND A FINE OF UP TO $10,000. (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003.)

ATTACH PHOTOCOPY OF VALID IDENTIFICATION. APPLICATION WILL NOT BE PROCESSED WITHOUT VALID IDENTIFICATION.

YOUR SIGNATURE _____ DATE OF APPLICATION _____