



JASON VANDERSTELT
NEWAYGO COUNTY CLERK
COUNTY BUILDING
P.O. BOX 885
WHITE CLOUD, MI 49349-0885

231/689-7235

APPLICATION FOR CERTIFIED COPY OF DEATH RECORD
PRINT CLEARLY

1. Applicant Name: _____

Street: _____

City: _____ State _____ Zip _____

Phone: _____

****DEATH RECORD INFORMATION****

2. Name at Death: _____
First _____ Middle _____ Last _____

3. Date of Death: _____

4. Place of Death (if known): _____

5. APPLICANT'S SIGNATURE _____
Signature _____ Date _____

One Certified Copy	\$20.00	\$
_____ Add'l Copies	\$ 7.00	\$
	Total Enclosed	\$

MAIL THIS APPLICATION WITH CHECK OR MONEY ORDER PAYABLE TO:
NEWAYGO COUNTY CLERK