Blanca Tuma, County Clerk/Local Registrar, Wise County
200 N. Trinity • P.O. Box 359 • Decatur, TX 76234 • (940) 627-3351
blanca.tuma@co.wise.tx.us • wisecountytx.gov

APPLICATION FOR CERTIFIED COPY OF BIRTH OR DEATH CERTIFICATE

BIRTH- NUMBER REQUESTED
_____$23.00 Each Certified Copy

DEATH- NUMBER REQUESTED
_____$21.00 First Certified Copy
_____$4.00 Each Additional Copy

(Accepted forms of payment include: Cash, Cashier's Check or Money Order)

- PLEASE PRINT ALL INFORMATION AND PRESENT VALID GOVERNMENT ISSUED PHOTO ID.

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

☐ **I wish to make a voluntary contribution of $5.00 to promote healthy early childhood by supporting the Texas Home Visitation Program administered by the Office of Early Childhood Coordination of Health and Human Services.**

7. Applicant's Name: _____8. Phone Number_____

9. Mailing Address: _____
Street Address City State Zip

10. Relationship to Person on Record: _____11. Purpose for obtaining this record: _____

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)

_____ _____
Signature of Applicant **Date**

FOR OFFICE USE ONLY

Deputy_____ Certificate #_____ Type of ID_____ ID# _____