

**Anne B. Norlander**

Calhoun County Clerk and Register of Deeds

315 W. Green St., Marshall, MI 49068

(269) 781-0718 - Fax (269) 781-0721

**DEATH CERTIFICATE REQUEST FORM**

**FULL NAME OF DECEASED**

\_\_\_\_\_

Please Print

<b>Date of Death:</b>	<b>City/Twp./Village of Death:</b>	
1 Certified Copy.....\$10.00 Add'l. copies of same record.....\$ 5.00	Number of copies Requested: _____	Method of Payment: Cash ____ Check ____ Credit Card ____  Total \$
<b>Date:</b>	IF USING CREDIT CARD: VISA ____ MASTER CARD ____ CARD# _____ EXP. DATE _____  Cardholders Signature _____	

NOTE: If exact year is unknown, please estimate within 5 years. If NO date is known, you will be instructed on how to research the records.

**Return Address Information: Name** \_\_\_\_\_

(Please Print)

**Mailing Address** \_\_\_\_\_

**Daytime Phone #** \_\_\_\_\_

\_\_\_\_\_

There is an additional \$3.00 charge for **faxed** requests.

Rev. 04/2007