

**MENARD COUNTY CLERK & RECORDER**

**Martha "Marty" Gum  
102 South Seventh Street  
Petersburg, Illinois 62675  
(217)632-3201 or (217)632-2415**



**Deputy Registrar: Bonnie Davis  
Deputy Clerk: Kelsie Smith**

**REQUESTS FOR VITAL RECORDS**

YOUR NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

NUMBER OF COPIES DESIRED: \_\_\_\_\_ CERTIFIED COPY (\$11.00 for the 1<sup>st</sup> and \$8.00 for each additional)  
\_\_\_\_\_ NON-CERTIFIED COPY (\$3.00 each)

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**BIRTH RECORDS**

NAME ON BIRTH RECORD: \_\_\_\_\_  
FIRST MIDDLE LAST

YOUR RELATIONSHIP TO PERSON NAMED ABOVE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ COUNTY: \_\_\_\_\_  
MONTH DAY YEAR

FATHER'S NAME: \_\_\_\_\_ MOTHER'S NAME (Maiden): \_\_\_\_\_

SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

**DEATH RECORDS**

NAME OF DECEASED: \_\_\_\_\_

DATE OF DEATH: \_\_\_\_\_ COUNTY: \_\_\_\_\_

YOUR RELATIONSHIP TO DECEASED: \_\_\_\_\_

SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

**MARRIAGE RECORDS**

NAME OF GROOM: \_\_\_\_\_

NAME OF BRIDE (Before Marriage): \_\_\_\_\_

DATE OF MARRIAGE: \_\_\_\_\_ COUNTY: \_\_\_\_\_

YOUR RELATIONSHIP TO BRIDE/GROOM: \_\_\_\_\_

SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

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(217)632-3201 or (217)632-2415**



**Deputy Registrar: Bonnie Davis  
Deputy Clerk: Kelsie Smith**

**REQUESTS FOR VITAL RECORDS**

YOUR NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

NUMBER OF COPIES DESIRED: \_\_\_\_\_ CERTIFIED COPY (\$11.00 for the 1<sup>st</sup> and \$8.00 for each additional)  
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**BIRTH RECORDS**

NAME ON BIRTH RECORD: \_\_\_\_\_  
FIRST MIDDLE LAST

YOUR RELATIONSHIP TO PERSON NAMED ABOVE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ COUNTY: \_\_\_\_\_  
MONTH DAY YEAR

FATHER'S NAME: \_\_\_\_\_ MOTHER'S NAME (Maiden): \_\_\_\_\_

SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

**DEATH RECORDS**

NAME OF DECEASED: \_\_\_\_\_

DATE OF DEATH: \_\_\_\_\_ COUNTY: \_\_\_\_\_

YOUR RELATIONSHIP TO DECEASED: \_\_\_\_\_

SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

**MARRIAGE RECORDS**

NAME OF GROOM: \_\_\_\_\_

NAME OF BRIDE (Before Marriage): \_\_\_\_\_

DATE OF MARRIAGE: \_\_\_\_\_ COUNTY: \_\_\_\_\_

YOUR RELATIONSHIP TO BRIDE/GROOM: \_\_\_\_\_

SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

**MENARD COUNTY CLERK & RECORDER**

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DATE OF BIRTH: \_\_\_\_\_ COUNTY: \_\_\_\_\_  
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DATE OF DEATH: \_\_\_\_\_ COUNTY: \_\_\_\_\_

YOUR RELATIONSHIP TO DECEASED: \_\_\_\_\_

SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

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NAME OF GROOM: \_\_\_\_\_

NAME OF BRIDE (Before Marriage): \_\_\_\_\_

DATE OF MARRIAGE: \_\_\_\_\_ COUNTY: \_\_\_\_\_

YOUR RELATIONSHIP TO BRIDE/GROOM: \_\_\_\_\_

SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

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YOUR RELATIONSHIP TO DECEASED: \_\_\_\_\_

SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

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NAME OF GROOM: \_\_\_\_\_

NAME OF BRIDE (Before Marriage): \_\_\_\_\_

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SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

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SIGNATURE OF PERSON APPLYING: \_\_\_\_\_

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NAME OF GROOM: \_\_\_\_\_

NAME OF BRIDE (Before Marriage): \_\_\_\_\_

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