

ISGS DEATH CERTIFICATE REQUEST

******* (1916 - 1947 ONLY) *******

Print and use this form to request death certificate copies (1916 - 1947 only) via postal mail. You may send in as many requests at the same time as you wish. **Cost for each death certificate requested is: \$ 6.00 for ISGS Members and \$ 10.00 for non-members.** Mail requests and your check (made out to Illinois State Genealogy Society) to: **ISGS, P.O. Box 10195, Springfield, IL 62791-0195.** Be sure to include your name and address (for the return of your certificates) on the bottom portion of each form. *(Instructions: search for and find the death certificate you wish to obtain by going to the "Illinois State Archives Death Certificate Index" at the following Internet address:*

<http://www.ilsos.net/departments/archives/genealogy/forms/idphdeathsrch.html>

Copy the information extracted exactly as it appears on your computer screen and then transfer the information to the form below. Certificate requests will be completed on a "first come - first served" basis.

LAST NAME: _____ **FIRST NAME:** _____

MIDDLE NAME: _____ **SEX/RACE:** _____ **AGE:** _____

CERT. # _____ **DEATH DATE (MM/DD/YYYY)** _____

COUNTY: _____ **CITY:** _____

DATE FILED: _____

LAST NAME: _____ **FIRST NAME:** _____

MIDDLE NAME: _____ **SEX/RACE:** _____ **AGE:** _____

CERT. # _____ **DEATH DATE (MM/DD/YYYY)** _____

COUNTY: _____ **CITY:** _____

DATE FILED: _____

LAST NAME: _____ **FIRST NAME:** _____

MIDDLE NAME: _____ **SEX/RACE:** _____ **AGE:** _____

CERT. # _____ **DEATH DATE (MM/DD/YYYY)** _____

COUNTY: _____ **CITY:** _____

DATE FILED: _____

Of Requests included in this mailing: _____ **Payment Amount submitted:** _____