



BRANCH OFFICE
Veterans Memorial Courthouse
Lansing, MI 48933
Email: clerk@ingham.org
Website: clerk.ingham.org

Barb Byrum
Ingham County Clerk

MAIN OFFICE
P.O. Box 179
341 South Jefferson
Mason, MI 48854
Phone: (517) 676-7201

BIRTH RECORD REQUEST FORM

Instructions: Birth records are confidential and may only be released to the subject of the record, parent listed on the record, guardian, or another authorized party. Court-authorized guardians must furnish signed Letters of Guardianship dated within the last 30 days. Please complete the form and submit it by email or mail. Please include all requested documentation to prevent processing delays. *Note: If your request is urgent, please indicate your request be sent via USPS Priority Mail Express for an additional charge of \$45.* Payment may be made by debit/credit card, check, or money order (made payable to Ingham County Clerk). Please no cash.

A COPY OF THE REQUESTOR'S GOVERNMENT-ISSUED PHOTO IDENTIFICATION IS REQUIRED.

Birth Record	Full Name on Record (First, Middle, Last)		Date of Birth (MM/DD/YYYY)
	1. Was the person adopted? <input type="checkbox"/> Yes <input type="checkbox"/> No		City of Birth
	2. Were the parents married at the time of the birth? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Full Name of Parent		Full Name of Other Parent
	Maiden/Prior Last Names		Maiden/Prior Last Names

Requester Information	Full Name		Email Address
	Signature (Required)		<input type="checkbox"/> Check to receive alerts from Clerk Byrum's office
	Mailing Address (inc. City, State & Zip Code)		<div>PLACE PHOTO IDENTIFICATION HERE</div> <div>A COPY OF UNEXPIRED GOVERNMENT-ISSUED PHOTO ID <u>MUST</u> BE PROVIDED WITH YOUR REQUEST</div>
	Phone Number		
Payment	<div>Payment Calculator</div> <div>First Copy: \$30.00 \$ 30.00</div> <div>Each <u>Additional</u> Copy: ____ x \$15 \$</div> <div>Optional Expedite Mailing: \$45.00 \$</div> <div>Subtotal \$</div>		

Card Payment Option	Name on Card		Billing Address (inc. zip code)	
	Signature (Required)		*With your signature, you are authorizing any applicable card service fee (details at clerk.ingham.org) and agreeing to abide by your cardholder agreement.	
	Card Number		Expiration Date (MM/YYYY)	Security Code

Email your request to clerk@ingham.org or mail it to Ingham County Clerk, PO Box 179, Mason, MI 48854.

PENALTIES: Anyone who obtains or attempts to obtain a vital record of another person with the intent to commit identity theft or another crime is guilty of a felony punishable by imprisonment for up to five years and/or a fine of up to \$25,000.

* Do not forget to include a copy of your ID! *

* Make checks payable to Ingham County Clerk!*

(Revised 01/2024)