

A Community of Spirit,

Pride and Conviction...

R E D

B U D

Web Site: cityofredbud.org

200 East Market Street
Red Bud, Illinois 62278-1597
E-Mail: info@cityofredbud.org

A Way of Life... Red Bud

City Hall: (618) 282-2315

City Hall Fax: (618) 282-4344

Utility Department: (618) 282-3339

Application for Search of Birth Record Files

FULL NAME:	FIRST	MIDDLE	LAST			
PLACE OF BIRTH:	HOSPITAL	CITY	COUNTY			
DATE OF BIRTH:	MONTH	DAY	YEAR	SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTH CERTIFICATE NUMBER	
FATHER:	NAME			PARENT'S ADDRESS AT TIME OF BIRTH		
MOTHER:	MAIDEN NAME			MARRIED NAME		
ATTENDANT AT BIRTH (IF KNOWN)	FULL NAME			ADDRESS		

NOTE: There is no charge for a certification when required by the Veteran's Administration.

Evidence of the V.A.'s requirement of this record must accompany the application.

Birth certificates are confidential records, and copies can be issued to persons entitled to receive them. The application must indicate the requestor's relationship to the person and the intended use of the certification.

FURNISH ME ____ CERTIFIED COPIES 1 st copy: \$5.00, additional copies: \$2.00/each			AMOUNT ENCLOSED: \$_____ <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CHECK		
APPLICATION MADE BY Signature:			MAIL COPY TO (IF OTHER THAN APPLICANT) NAME:		
STREET ADDRESS:			STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:	CITY:	STATE:	ZIP CODE:
YOUR RELATIONSHIP TO PERSON:			INTENDED USE OF CERTIFICATION:		

Please note: We accept cash, check or money order (pay to the order of "City of Red Bud").

**Application must be dropped off in person or mailed with payment to: Red Bud City Hall
200 East Market Street, Red Bud, IL 62278.**

Birth Certificate Application September 11, 2024