Sheridan County Clerk and Recorder 100 West Laurel Ave Plentywood, MT 59254 Ph 406-765-3403, Fax 406-765-2609, E-mail record_supt@sheridancountymt.gov PLEASE READ THESE INSTRUCTIONS CAREFULLY

WHO CAN ORDER A BIRTH CERTIFICATE? Only those authorized by 50-15-121 MCA and 37.8.126 ARM, which includes the registrant (14 years old or older), the registrant's spouse, children (with proof of relationship), parents, grandparents (with proof of relationship), a caretaker relative, guardian, an authorized representative, or those who provide documentation showing it is needed for determination or protection of the individuals personal or property rights. Proof of relationship, guardianship, caretaker relative, or authorization is required to obtain a certify copy of a birth record.			
Step-relatives, in-laws, aunts, uncles, cousins, ex-spouses, and a natural parent of an adoptive child are not eligible to receive a certified copy of a birth certificate.			
IDENTIFICATION IS REQUIRED The person signing the request must provide an enlarged legible photocopy of both sides of their valid driver's license or other legal picture identification with a signature or the requestor must have this application notarized.			
Suggested Identification			
Picture ID with a Signature	OR Two Forms of ID – One MUST have a S		
 Driver's License State ID Card 	Social Security Card Credit/Deb Work ID Card School ID C		• Have an authorized family member that
 State ID Cald Passport 	Work ID Card School ID Card Car registration/Insurance Insurance F		has an ID order the certificate
Military ID Card	Doctor/Medical record Pay Stub	Cecolu	
Tribal	Fishing License Traffic/ Pay	wn ticket	
	US Military DD214 Court recor	d	
	Utility Bill with a current addressVoter Registration Card		
If a picture ID with a signature is not available, two other forms of identification are required; one MUST have a signature. <u>IMPORTANT</u> : If the identification requirement is <u>NOT</u> met or if the application is incomplete, your request will be returned and significant delays in processing your order may occur.			
	FEE (All fees must be U.S	S funde)
• <u>CERTIFIED COPIES OF A BIRTH CERTIFICATE</u> cost \$8.00 for the each copy. (non-refundable)			
• INFORMATIONAL COPIES OF A BIRTH CERTIFICATE may be issued to anyone as long as the birth occurred 30 years prior to the date of application, cost			
is \$.50. (non-refundable)			
• <u>SEARCHES</u> : \$.50 for each year searched. (non-refundable)			
Please complete the following information.			
FULL First, Middle and Last Name on Birth Certificate:			
Has name ever been changed other than marriage No Yes if so original name			
Date of Birth: Place of Birth (City or County):			
Mother's Full Maiden Name:			
Father's Full Name:			
Your relationship to the certificate holder :(self, mother, father etc)			(self, mother, father etc)
Reason the Birth Certificate is needed: # of copies			# of copies
Mailing or Delivery Address:			
Name:			
Address: City, State, Zip:			
Daytime Telephone Number: Signature of Applicant			
Notary (For use if needed)	/erification of Signer's ID Is Mandatory		
		I	
State of			Official Use Only
County of			Date
This record was signed and sworn to (or affirmed) before me on		by	Rec#
	(Date)		Amount
(Name of Signer)	_		Cert #
			Ser #
(Notary's Signature)	[Official Stamp]		Comment

NOTICE: STATE LAW PROVIDES PENALTIES FOR PERSONS WHO WILLFULLY AND KNOWINGLY USES OR ATTEMPTS TO USE OR FURNISH TO ANOTHER FOR USE, FOR ANY PURPOSE OF DECEPTION, ANY CERTIFICATE, RECORD, REPORT, OR CERTIFIED COPY MADE, ALTERED, AMENDED, OR MUTILATED. (50-15-114(C), MCA)