Wyoming Department of Health

REQUEST FOR CERTIFIED COPY OF A WYOMING VITAL RECORD

Vital Statistics Services • 2300 Capitol Avenue • Cheyenne, WY 82002
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For office use only:

WYOMING BIRTH RECORD — Record(s) Requested ($25 each): (*SEE EXCESSIVE COPIES BELOW*)

☐ _____ (#) Birth Certificate(s) ☐ _____ (#) Affidavit(s) Acknowledging Paternity

Complete information as it appears on the record:

Full First Name	Full Middle Name	Full Last Name	
If this record could be listed under any other name (due to legal name change or adoption) please list other possible names on record:			
Date of Birth (mm/dd/yyyy)	Place of Birth (City or County)		
Mother/Parent - Full First Name	Full Middle Name	Full Last Name	Full Maiden Name
Father/Parent - Full First Name	Full Middle Name	Full Last Name	Full Maiden Name

EXCESSIVE COPIES: Once four (4) or more certified copies of a birth certificate have been requested (lifetime) an additional Excessive Copies Form must be completed for each additional request. This form is available on our website and must be notarized.

WYOMING MARRIAGE and/or DIVORCE RECORD — Record(s) Requested ($25 each):

☐ _____ (#) Marriage Certificate(s) ☐ _____ (#) Divorce Certificate(s)

Complete information as it appears on the record:

Husband/Wife/Spouse - Full First Name	Full Middle Name	Full Last Name (At Time of the Event)
Husband/Wife/Spouse - Full First Name	Full Middle Name	Full Last Name (At Time of the Event)
Date of Event (mm/dd/yyyy) Marriage: / / Divorce: / /		Place of Event (City or County) Marriage: Divorce:

WYOMING DEATH RECORD—Record(s) Requested 1 for $25 plus _____ (#) for $20 each.

Complete information as it appears on the record:

Full First Name	Full Middle Name	Full Last Name
Date of Death (mm/dd/yyyy)	Place of Death (City or County)	Date of Birth (mm/dd/yyyy)

REQUESTOR'S INFORMATION

Full First Name	Full Middle Name	Full Last Name		
Mailing Address (Street or PO Box)		City	State	Zip Code
Contact Phone Number and/or Email Address				
Please state your relationship to the person(s) named on the certificate(s) requested:				
Purpose for requesting the certificate(s):				
Signature of the Person Requesting Certificate(s) (Must be 18 or older) ► Date:				

ATTACH PHOTOCOPY OF A VALID GOVERNMENT ISSUED ID HERE

(Driver's License, State ID Card, Passport, Tribal ID)

*If signature is located on the back, provide copies of both sides

**IDs less than 60 days expired are still acceptable.

No staples please – clear tape is preferred.

OR

Provide notary information here.

For office use only:

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REQUESTS — WHO MAY HAVE COPIES: Wyoming is a closed record state, meaning vital records are considered confidential information and closed to the general public until one hundred (100) years after the date of birth or fifty (50) years after the date of marriage, divorce, or death. Generally, only those listed on the record are entitled to receive certified copies, though there are exceptions. Please refer to our website for more information on possible exceptions. Individuals entitled to received certified copies of vital records are as follows:

Birth Certificates:

- Registrant (child named on record), if of legal age (18 years or older)
- Either parent named on the certificate
- Lawyer representing either the registrant or the parent(s) *
- Legal guardian with certified copy of the guardianship papers (obtained from a Court) *
- Unemancipated Minor with signed affidavit *

Marriage / Divorce Certificates:

- Either party named on the certificate
- Lawyer representing either party *

Death Certificates:

- Immediate family members (parent, current spouse, child)
- Lawyer representing the immediate family *
- A bank, executor of the estate, insurance company, or anyone requiring a certificate to pay a policy or death benefit on the decedent *****
- In some cases, individuals or organizations may be authorized to obtain a certificate when determining a personal or property right *****

** The applicant must demonstrate the requirement for the certificate*

GENEALOGY REQUESTS: Written verifications of a record may be issued for genealogical research if the record requested is a closed record. In order to obtain a verification of a closed record, the requestor must provide evidence that the individual(s) listed on the record are deceased (provide copies of death certificates) as well as documentation showing how the requestor is related to the person listed on the record (through copies of birth and marriage records). Verifications are a redacted version of the full record and may not contain all the information available on the original.

IDENTIFICATION REQUIRED: The requestor must include a photocopy of a valid government issued picture identification that includes a permanent signature with their request. IDs less than 60 days expired are still acceptable. *The validity of the identification submitted is determined by Vital Statistics Services.* A notarized signature on the front of this form may take the place of an ID. Please refer to our website for more information on possible exceptions.

Accepted Government Issued IDs:

- Driver's License
- State ID Card
- Passport
- Passport Card
- Tribal ID
- Consular Card
- Retired or Dependent Military ID
- U.S. Concealed Weapons Permit
- State or Federal Prison Corrections ID

DESCRIPTION OF CERTIFIED COPIES: Standard certified copies of vital records are computer generated (abstracts) and are acceptable for all legal purposes including but not limited to: Government Agencies (Department of Motor Vehicles, Passport, etc.), Insurance Companies, and Educational Institutions.

SUBMITTING THE REQUEST: Mail this completed form to the address listed on the front. Ensure you have signed the request, attached a photocopy of your identification, included a payment in the correct amount to cover the cost of your request(s), and provided a **SELF-ADDRESSED STAMPED ENVELOPE** to mail the records requested to you. Checks or money orders should be made payable to Vital Statistics Services. The check must be bank-personalized and on the **account of the person making the request.** Cash is also accepted but not recommended. *If your request requires the Excessive Copies Form (4 or more certificates requested in a lifetime) please be sure to include this form as well.*

Fees – Certified Copies	Fees	# of Copies	Sub-total Cost
Birth, Marriage, Divorce, Stillbirth	$25.00		
Death - First Copy (per request)	$25.00		
Death - Each Additional Copy	$20.00		
Death Search – Per 5 years searched. Fee covers one certified copy if found	$35.00		
Search - For every five (5) years searched. Fee covers one certified copy if found.	$30.00		
Photocopy of an Original Certificate	$30.00		
Adoption; Court Ordered Change, Correction or Amendment; Court Order of Paternity	$55.00		
Corrections (not involving a court ordered action)	$20.00		
Affidavit Acknowledging Paternity	$25.00		
Replacement Certificate Following a Correction (Previously issued certificate must be returned.)	$15.00		
Self Addressed Stamped Envelope ☐ Cash ☐ Check ☐ Money Order☐	**Total**		