Springfield/Greene County Health Department

Missouri Department of Health
Bureau of Vital Records
Application for Certified Copy of Death Certification

The law requires a fee of $13.00 for the first copy and $10.00 for each subsequent copy issued for the same person in the same visit. The fee must accompany the application. Please do not send cash by mail. Make check or money order payable to: Greene County Treasurer

Mail this application and your check or money order to:
Springfield/Greene County Health Department
Vital Records Section
227 East Chestnut Expressway
Springfield, MO 65802

Number of copies requested:_____

_____
Full name of deceased First Middle Last

Could this be recorded under any other name?_____Sex_____

_____
Date of Death Month / Day / Year

_____
Place of Death City State

_____
Name of Spouse First Middle Last

Signature of Applicant_____

How are you related to this person?_____

Address of Applicant:_____

City_____State_____Zip_____Daytime phone (____)_____

WARNING: False application for a certified copy of a vital record is a felony punishable by a fine up to $5,000 or five (5) years in prison or both (RSMo 193.315).

FOR OFFICE USE ONLY

Date_____Paid $_____Cash_____

Money Order_____Check_____Credit Card_____

Certificate #_____Receipt #_____