

	one may buy a <b>noncertified death</b> for informational use only.	r <b>ecord</b> for a Minn	esota death.	Printe	d on pla	in paper, n	oncert	tified d	leath records	
MANDATORY: Information about the deceased person - used to locate the requested death record										
uosia	Deceased person's first name (required)	Deceased person's middle name (required) Deceased person's las					t name (	(require	d) Name suffix	
Deceased person	Date of death [MM/DD/YYYY] (required)	Date of birth [MM/DD/YYYY] or Age City of death				County of death (required)				
Dece	First parent's name					Spouse on	on record (if any)			
The information in this section is REQUIRED if you are sending your application to a vital records office by mail										
Requester name (please print)										
Requester	Mailing address - UPS will not deliver to PO boxes or APO addresses.			# (	City		State		ZIP	
Re	Daytime phone	Email								
Request information								Fee	Subtotals	
One noncertified death record costs \$13								\$13	\$13	
Additional copies are \$6 each <i>if you buy them when you purchc</i>				at \$13	3. # of a	additional c	opies	x \$6		
Fees are due with the application and are non-refundable. <i>Min</i>					Annesota Statutes, section 144.226. Write in total if filling out by hand					
How do you want to pay?								Amount due		
			Make check or money order payable to Ramsey County and send by mail with application. DO NOT SEND CASH.							
Money order Money order #			Checks returned for non-payment will result in a \$30 charge to you. You could also face civil penalties. <i>Minnesota Statutes, section 604.113, subdivision 2.</i>							
If you have questions about this form, contact askVR@ramseycounty.us or 651-266-1333.										
Mail your application, check or money order to:										
Saint Paul – Ramsey County Public Health Attention: Vital Records (Death) 555 Cedar Street Saint Paul, MN 55101										