

Crystal D. Gilliard
Union County Register of Deeds
P. O. Box 248
Monroe, NC 28111-0248
704-283-3610/704-283-3796/704-282-0201

Birth Certificate

Full Name on
Certificate

FIRST

MIDDLE

LAST (MAIDEN NAME, IF MARRIED)

Date of Birth

Sex

Male

Female

Place of Birth

UNION COUNTY

Full name of Father

Mother's full
Maiden name

FEES

In Person: \$10.00 each (certified copy)
 \$ 1.00 each (uncertified copy)

By Mail: \$10.00 each (certified copy)
 \$ 1.00 each (uncertified copy)

WE ACCEPT MONEY ORDERS, CASH and CREDIT CARD PAYMENTS.
(Additional fee is charged if paying by credit card)

The certificate above is for: (Circle one)

Myself
My Spouse
My Brother / sister

My Child / step-child
My Parent / step-parent
My Grandparent / grandchild

Authorized agent, attorney or
Legal Representative (Proof required)

IT IS A FELONY VIOLATION OF NORTH CAROLINA LAW (G.S. 130A-26) TO MAKE A FALSE STATEMENT ON THIS APPLICATION OR TO UNLAWFULLY OBTAIN A CERTIFIED COPY OF A BIRTH, DEATH OR MARRIAGE CERTIFICATE.

I HEREBY CERTIFY THAT ALL THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF PERSON APPLYING FOR CERTIFICATE

Date

Print name of person applying for certificate

Phone

Address

For office use only

Volume _____ Page _____

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Person Processing _____