

VITAL STATISTICS
TEXAS DEPARTMENT OF STATE HEALTH SERVICES

AUTHORIZATION FORM

STATE OF _____

COUNTY OF _____

My name is _____

I request that Vital Statistics Unit in Austin, Texas allow Antonio or Tony Dominguez (Representative of RSVPpassports) to obtain a certified copy of the birth/death certificate on my behalf.

My relationship to the **person on the certificate** is: _____
(spouse, mother, father, son, daughter, sibling, grandparent or legal representative of person on record).

The information on the (birth/death) certificate being requested:

Name: _____

Date of event: _____

Place of event: _____

Mother: _____ Father: _____

Must include a copy of Qualified Applicants valid ID with notarized form.

Signature of Qualified Applicant: _____

Subscribed and sworn before me on this the _____ day of _____, in the year of _____.

SEAL

Signature of Notary Public

Please note: If the request is for legal reasons, please provide the legal documents that provide you the tangible interest/reason for obtaining the certificate, such as co-owner of business, executor or beneficiary of an estate, etc. Genealogy is not a legal reason to obtain a certificate. Death certificates are restricted for 25 years, and birth certificates are restricted for 75 years.

WARNING: IT IS A FELONY TO FALSIFY INFORMATION ON THIS DOCUMENT, THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT ON THIS FORM OR FOR SIGNING A FORM WHICH CONTAINS A FALSE STATEMENT IS 2 TO 10 YEARS IMPRISONMENT AND A FINE OF UP TO \$10,000 (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003)