

**MONTANA VITAL RECORDS**  
**111 N SANDERS RM 6 / PO BOX 4210**  
**HELENA, MONTANA 59604-4210**  
**Phone: 406-444-2685**

**PLEASE READ THESE INSTRUCTIONS CAREFULLY**

**WHO CAN ORDER A BIRTH CERTIFICATE?**

Only those authorized by 50-15-121 MCA and 37.8.126 ARM, which includes the registrant (14 years old or older), the registrant's spouse, children (with proof of relationship), parents, grandparents (with proof of relationship), a caretaker relative, guardian, an authorized representative, or those who provide documentation showing it is needed for determination or protection of the individuals personal or property rights. Proof of relationship, guardianship, caretaker relative, or authorization is required to obtain a certified copy of a birth record.

Step-relatives, in-laws, aunts, uncles, cousins, ex-spouses, and a natural parent of an adoptive child are not eligible to receive a certified copy of a birth certificate.

**IDENTIFICATION IS REQUIRED**

The person signing the request must provide an enlarged legible photocopy of both sides of their valid driver's license or other legal picture identification with a signature or the requestor must have this application notarized.

**Suggested Identification**

Picture ID with a Signature	OR Two Forms of ID – One MUST have a Signature	OR
<ul style="list-style-type: none"> <li>• Driver's License</li> <li>• State ID Card</li> <li>• Passport</li> <li>• Military ID Card</li> <li>• Tribal</li> </ul>	<ul style="list-style-type: none"> <li>• Social Security Card</li> <li>• Work ID Card</li> <li>• Car registration/Insurance</li> <li>• Doctor/Medical record</li> <li>• Fishing License</li> <li>• US Military DD214</li> <li>• Utility Bill with a current address</li> <li>• Voter Registration Card</li> </ul>	<ul style="list-style-type: none"> <li>• Credit/Debit/ATM Card</li> <li>• School ID Card</li> <li>• Insurance Record</li> <li>• Pay Stub</li> <li>• Traffic/ Pawn ticket</li> <li>• Court record</li> </ul>
		<ul style="list-style-type: none"> <li>• Have an authorized family member that has an ID order the certificate</li> </ul>

If a picture ID with a signature is not available, two other forms of identification are required; one **MUST** have a signature. Please include photocopies of **both sides** of the ID when mailing your request. **IMPORTANT: If the identification requirement is NOT met or if the application is incomplete, your request will be returned and significant delays in processing your order may occur.**

**FEE (All fees must be U.S. funds)**

- **CERTIFIED COPIES OF A BIRTH CERTIFICATE: Effective September 21, 2024** cost \$8.00 each (**non-refundable**)
- **INFORMATIONAL COPIES OF A BIRTH CERTIFICATE** may be issued to anyone as long as the birth occurred 30 years prior to the date of application, the cost is \$8.00. (**non-refundable**)
- **CERTIFIED COPIES OF DOCUMENTS** on file with the state (i.e. Acknowledgment of Paternity, correction affidavits), **the cost is \$8.00 (non-refundable)**

**Please Make CHECKS Payable To: MONTANA VITAL RECORDS**

**Please complete the following information.**

**FULL** First, Middle and Last Name on Birth Certificate: \_\_\_\_\_

Has name ever been changed other than marriage  No  Yes If so, original name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth (City or County): \_\_\_\_\_ Sex of Child: \_\_\_\_\_

Mother's **Full Maiden** Name: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_

Your relationship to the certificate holder: \_\_\_\_\_ (*self, mother, father etc.*) \_\_\_\_\_ # of copies needed

Reason Birth Certificate is needed: \_\_\_\_\_

**Mailing or Delivery Address:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Notary (For use if needed) Verification of Signer's ID Is Mandatory**

State of \_\_\_\_\_  
 County of \_\_\_\_\_

This record was signed and sworn to (or affirmed) before me on \_\_\_\_\_ by \_\_\_\_\_  
 (Date)

\_\_\_\_\_  
 (Name of Applicant)

\_\_\_\_\_  
 (Notary's Signature)

[Official Stamp]

Official Use Only
Date _____
Rec# _____
Amount _____
Cert # _____
Ser # _____
Comment _____

**NOTICE: STATE LAW PROVIDES PENALTIES FOR PERSONS WHO WILLFULLY AND KNOWINGLY USE OR ATTEMPT TO USE THIS CERTIFICATE FOR ANY PURPOSE OF DECEPTION. (50-15-114, MCA)**