

APPLICATION FOR CERTIFIED COPY OF DEATH

The law requires a fee of \$14.00 for a search of the files. This fee entitles you to a certified copy of the death certificate. Any additional copies are \$10.00 each. FEE MUST ACCOMPANY APPLICATION. Please make check or money order payable to:

**LINN COUNTY HEALTH DEPARTMENT
PO BOX 280
635 SOUTH MAIN ST
BROOKFIELD MO 64628**

Information about person whom death certificate is requested:

FULL NAME OF PERSON AT DEATH:

First	Middle	Last
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DATE OF DEATH:

Month	Day	Year
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Signature of Applicant: _____

Address: _____

Date: _____