Vital Records Authorization Form

Fresno Assessor/ Recorder (Paul Dictos, CPA)

Fresno County Recorder 1250 Van Ness Fresno, CA 93721

Instructions:

- Verify that all information below is correct.
- 2. Print and complete this form.

VitalChek Order Number:

| 3. | Sign and date the form (If notarization section is included |
|----|--|
| be | elow, signature must occur in the presence of a Notary Public. |
| 4 | Fay the signed form to (EEO) soo 4404 |

| below, signature must occur in the presence of a Not 4. Fax the signed form to (559)-600-1484. | icluded ary Public.) | |
|--|--|--|
| | Statement | |
| 103526(c), and am eligible to receive a certified copy individual(s). | affirm under penalty of perjury under the laws of the State ned in the California Health and Safety Code Section y of the birth, death or marriage record of the following | |
| Name of Person Listed on Certificate | Relationship to Person Listed on Certificate | |
| | | |
| Sworn on / / 20 at (City) | (State) | |
| | Signature | |
| Note: If submitting your order online or by fax and requesting | an Authorized Sirth Dooth or Marriage Confidents are sent the | |
| your Sworn Statement notarized using the Certificate of Ackno | wiedgment, below. | |
| A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. | | |
| Certificate of A | Acknowledgment | |
| State of) | | |
| County of) ss | | |
| On, before me, | . NOTARY PUBLIC , personally sert name and title of officer) | |
| appeared, (insert name of person signing) | , who proved to me on the basis of | |
| , | | |
| satisfactory evidence to be the person(s) whose names acknowledged to me that he/she/they executed the sar his/her/their signature(s) on the instrument the person(executed the instrument. | me in his/her/their authorized capacity(ies), and that by | |
| I certify under PENALTY OF PERJURY under the laws is true and correct. | of the State of California that the foregoing paragraph | |
| | (NOTARY SEAL) | |
| Notary Signature | | |