REQUEST FOR SEARCH OF BIRTH RECORDS

EVANS COUNTY

1. FULL NAME AT BIRTH: 2. DATE OF BIRTH: 3. PLACE/COUNTY OF BIRTH: 4. FULL NAME OF FATHER: 5. FULL MAIDEN NAME OF MOTHER: 6. SIGNATURE OF REQUESTER: 7. RELATIONSHIP TO PERSON LISTED IN #1: 8. REQUESTER'S MAILING ADDRESS:			
		10. NUMBER OF CERTIFIED COPIES REQUESTED: *YOU MUST PRESENT YOUR PICTURE ID TO OBTAIN A BIRTH CERTIFICATE.	
		The above fees have been established in accordance with Chapter 31-10 of the Official Code of Georgia. Any person who willfully or knowingly supplies false information on this form to be used for any purpose of deception with intent to defraud, willfully uses or attempts to use any certificate of birth or copy of any record of birth knowing that such certificate was issued upon a record which was false or which relates to the birth of another person may be fined not more than \$10,000 or imprisoned for not more than five (5) years, or both upon conviction. • To request a birth record by mail, submit this form along with a copy of your photo ID, money order and a self addressed stamped envelope to: Evans County Probate Court, P.O. Box 852, Claxton, GA 30417	
			For office use only Serial #
		Total amount: \$	Cash MO