

Vital Records Authorization Form
Fresno Assessor/ Recorder (Paul Dictos, CPA)

Hall Of Records
2281 Tulare Street Rm.# 303
Fresno , CA 93721

Instructions:

1. Verify that all information below is correct.
2. Print and complete this form.
3. Sign and date the form (If notarization section is included below, signature must occur in the presence of a Notary Public.)
4. Fax the signed form to (559)-600-1484.

VitalChek Order Number:

Sworn Statement

I, _____ swear/affirm under penalty of perjury under the laws of the State of California, that I am an authorized person, as defined in the California Health and Safety Code Section 103526(c) , and am eligible to receive a certified copy of the birth, death or marriage record of the following individual(s).

Name of Person Listed on Certificate	Relationship to Person Listed on Certificate

Sworn this _____ day of _____, 20____ at _____
(Day) (Month) (City) (State)

Signature

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 Acknowledgment

State of _____)
County of _____) ss

On _____, before me, _____, NOTARY PUBLIC, personally
(insert name and title of officer)
appeared, _____, who proved to me on the basis of
(insert name of person signing)

satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

(NOTARY SEAL)

Notary Signature