AUTHORIZATION LETTER TO ISSUE DEATH CERTIFICATE

I	(print your name)
give permission to:	
	(person picking up certificate)
to obtain a death certificate for:	
	(person named on certificate).
Date of Birth of person named on certification	nte:
Date of Death of person named on certific	rate:
Please check off your relationship to the p	person named on the certificate.
Current Spouse	Sister
Child	Brother
Mother	Grandchild
Father	Grandparent
Sign your name here	Date

YOU MUST ATTACH A COPY OF YOUR VALID STATE ID. MAKE SURE THE PICTURE AND SIGNATURE ARE CLEAR. THE PERSON PICKING UP THE CERTIFICATE WILL ALSO NEED TO PROVIDE THEIR VALID STATE ID.