## DEPARTMENT OF HEALTH

## **Noncertified Birth Record Request**

Use this form to request a noncertified (informational only) Minnesota birth record on plain paper. If we cannot find the birth record you request, we will send you a certified Statement of No Birth Record Found.

NOTE: County offices generally provide the fastest vital records service; in-person requests can often be fulfilled while you wait. Non-certified birth records are available from any Minnesota county. Records for births in 2000 or before are only available from the county of birth or the Office of Vital Records (Minnesota Department of Health).

It's illegal to give false information to obtain a vital record, and it may subject you to fines, jail time, or both.

Information to find the birth record													
ubject	Child/subject first name		Child/subject middle name		Child/subject last name			Name suffix					
Child/Subject	Date of birth (MM/DD/YYYY) Sex Female Male		Minnesota city of birth		Minnesota county of birth			State of birth					
ents	Parent one first name Parent one		middle name Parent one last na		me	ne Last name before 1st marriage		Name suffix					
Parents	Parent two first name Parent two		middle name	Parent two last na	st name		ame before 1st marriage	Name suffix					
Requester information													
Requester name													
Requester street address (Express delivery will not deliver to PO boxes or APO addresses) Apt/Unit # Daytime phone (10-digits)								its)					
City			State	Zip code	E	mail							
REQ	UIRED – Choose from the	options bel	ow										
Records of children born to married parents are "public"; anyone can buy a noncertified <b>public</b> birth record. Records of children born to single mothers are "confidential" unless the mother chose to make the record public.													
1.	] I want an image of the paper record for a birth in 2000 or before.												
2.	I want a printout of a birth record that includes the subject's name, date and place of birth, and the names of the subject's parents. The printout <i>does not show</i> health information.												
3.	Birth records of children born to unmarried mothers are confidential unless the mother chose to make the record public at the time of birth. The persons below are eligible to buy noncertified <b>confidential</b> birth records. <b>Check one box:</b>												
	I am the subject of	the record a	age 16 or older		$\square$ I act for a Minnesota program that								
	□ I am a parent named on the record					administers child support, medical assistance, MinnesotaCare, and							
	I am the guardian of the subject (you must show a copy of the court order that names you)					services under Minnesota Care, and section 124D.23; Minnesota Statutes,							
	I am presenting your office with a copy of a court order issued by a U.S. court					<i>chapter 260E;</i> or a tribal child support program, <i>Minnesota Statutes, section</i> 144.225. (Must show employee ID)							
4.													
	<b>Choose one:</b> I am the mother named on the birth record I am a representative of local public health												
lf yo	If you checked options in #3 or #4, you must sign this form in front of a notary.												

## NONCERTIFIED BIRTH RECORD REQUEST

Requ	Jester Name:										
Requester and notary signatures											
l cer	tify that the information prov	vided on this application is	correct	t and complete to the be	est of my kno	owledge.					
Requ	iester signature		Notary stamp/seal								
Notary	Signed or attested before n Printed name of notary pub Notary public signature										
Fee	s and records request				Fee						
Firs	t noncertified birth record				\$13	\$13					
Ado	ditional birth records		# of e	extra copies	\$6 each						
Pro	cessing				Fee						
Sta	ndard — request processed	in the order received			\$0						
Fas	ter — request handled ahea	d of standard requests (d	oesn't i	nclude express delivery)	\$20						
Shi	pping				Fee						
Reg	gular first-class mail				<b>\$0</b>						
Exp	oress delivery (Check here 🗆	to require a signature.)			\$21						
<ul> <li>The Office of Vital Records and the express delivery service are not responsible for deliveries that do not require a signature. Express delivery services will not deliver to PO boxes or APO addresses.</li> <li>For delivery outside the United States, you must supply a prepaid express delivery envelope with your application.</li> </ul>											
Tot	tal due	ication and are non-refu	ındable.								
Pay	vment method										
	Credit card	Cardholder name			Valid thru (MM/YY)						
	MasterCard/VISA/Discover	Card number			3-digit code						
	Check Check # Money order	#	Make check or money order payable to Minnesota Department of Health. DO NOT SEND CASH. Checks returned for non-payment will result in a \$30 charge to you. You could also face civil penalties.								
Ser	nd your application and payr	nent to:	Incomplete requests								
Off Ma Fax Cou	nnesota Department of Heal ice of Vital Records <b>il:</b> PO Box 64499, St. Paul, M :: 866-416-1357 (credit card <b>urier/express delivery:</b> 625 F 155 (no vital-records counter	IN 55164-0499 payments only) Robert St. N, St. Paul, MN		The Office of Vital Records returns applications that are incomplete, not signed in front of a notary public, or not paid in full at the time of application. Unresolved requests will be closed 12 months after we receive them. Once a request is closed, customers must submit a new request and pay the fee again to update the record and/or receive the vital records.							
If you have <b>questions</b> , contact the Office of Vital Records at <u>health.vitalrecords@state.mn.us</u> or 651-201-5970.											