



## SWORN STATEMENT

I, \_\_\_\_\_, declare under penalty of perjury under the laws of the State of Texas, that I am an authorized person, as defined in Texas Health and Safety Code, and am eligible to receive a certified copy of the birth or death certificate of the following individual(s):

<b>Part I. ENTER NAME AND DATE OF BIRTH/DEATH/MILITARY DISCHARGE</b>	
FULL NAME OF PERSON ON RECORD	DATE OF BIRTH / DEATH / DISCHARGE

<b>PART II. ENTER RELATIONSHIP TO PERSON ON RECORD AND THE TYPE OF ID USED.</b>	
NAME AND RELATIONSHIP TO PERSON ON RECORD	TYPE AND NUMBER OF ID ACCEPTED WHEN NOTARIZED

**WARNING: THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT ON THIS FORM CAN BE 2-10 YEARS IN PRISON AND A FINE OF UP TO \$10,000. (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003)**

## CERTIFICATE OF ACKNOWLEDGMENT

**PART III. THIS SECTION MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC**

THE STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

Before me, \_\_\_\_\_ on this day personally appeared  
Name of Notary Public

\_\_\_\_\_ to be the person whose name is subscribed to the  
Name of Applicant  
foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

SEAL

\_\_\_\_\_  
(Signature of Notary Public)

MAIL THE APPLICATION, SWORN STATEMENT, PHOTOCOPY OF YOUR VALID PHOTO ID AND FEE  
TO:  
Laura Hughes, County Clerk  
1902 E. US Hwy 175  
Kaufman, Tx 75142

(APPLICATIONS WITHOUT PHOTO ID AND THE ATTACHED SWORN STATEMENT WILL NOT BE PROCESSED)