



Illinois Adoption Registry and Medical Information Exchange REQUEST FOR A NON-CERTIFIED COPY OF AN ORIGINAL BIRTH CERTIFICATE

I, _____, hereby request a non-certified copy of

(check the appropriate option):

- 1. My original birth certificate (include a copy of your photo ID card). Notary **NOT** required.
- 2. The original birth certificate of my deceased adopted or surrendered parent (include a copy of their death certificate, your birth certificate and a copy of your photo ID card). **Notary required/below.**
- 3. The original birth certificate of my deceased adopted or surrendered spouse (include a copy of their death certificate, the birth certificate of your minor child showing yourself and the adopted person as the parent, and a copy of your photo ID card). **Notary required/below.**

The adopted or surrendered person was born in the city of _____,
county of _____ on _____, _____ and the adopted name is:
Date Year

First name _____ Middle name _____

Last name _____

In the event that one or both of the birth parents have requested their identity not be released:

- a. I wish to receive a non-certified copy of the original birth certificate from which identifying information pertaining to my birth parents, who requested anonymity, has been redacted; or
- b. I do not wish to receive a redacted copy of the original birth certificate.

Signature _____

Date _____

Mailing address _____ City _____

State _____ ZIP code _____

Notary required if you checked box two or three above.

(Notary Public use only)

State of _____

County of _____

I, a Notary Public, in and for the said county, in the state aforesaid, do hereby certify that

_____ personally known to me to be the same person whose name is subscribed to the foregoing request, appeared before me in person and acknowledged that (he or she) signed such request as (his or her) free and voluntary act and that the statements in such request are true.

Given under my hand and notarial seal on _____, _____