

OFFICE USE ONLY  
CERT#



PRECINCT #4

Jefferson County  
Justice of the Peace, Pct #4  
Ray S. Chesson  
19217 FM 365  
Beaumont, Texas 77705  
409-434-5460

### APPLICATION FOR BIRTH AND DEATH RECORD

Birth Certificates				Death Certificates			
Type	Cost X	# of copies =	Total	Type	Cost X	# of copies =	Total
Certified Copy	\$23		\$	Certified Copy	\$21		\$
				Additional Copies	\$3		\$

#### IDENTIFY BIRTH OR DEATH RECORD INFORMATION (Part 1)

<b>Full Name of Person on Record</b>	First Name	Middle Name	Last Name	
<b>Date of Birth/Death</b>	Month	Day	Year	Sex
<b>Place of Birth/Death</b>	City or Town	County		State
<b>Full Name of Parent 1</b>	First Name	Middle Name	Maiden / Last Name	
<b>Full Name of Parent 2</b>	First Name	Middle Name	Maiden / Last Name	

#### APPLICANT INFORMATION (Part 2)

Applicant Name	Telephone #	Email Address		
Full Mailing Address	Street Address	City	State	Zip Code
Relationship to person listed above:	Purpose for obtaining this record:			

#### AFFIDAVIT OF PERSONAL KNOWLEDGE (MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC) (Part 3)

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Before me on this day appeared \_\_\_\_\_ now residing at \_\_\_\_\_ who is related to the person named on Part 1 as \_\_\_\_\_ and who on oath deposes and says that the contents of this affidavit are true and correct.

The applicant presented the following type and number of identification: \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature of Notary Public and Notary ID Number: \_\_\_\_\_

Typed or Printed Name: \_\_\_\_\_

Commission Expires: \_\_\_\_\_

Address: 19217 FM 365 Beaumont, Texas 77705

**WARNING: IT IS A FELONY TO FALSIFY INFORMATION ON THIS DOCUMENT. THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT ON THIS FORM OR FOR SIGNING A FORM WHICH CONTAINS A FALSE STATEMENT IS 2 TO 10 YEARS IMPRISONMENT AND A FINE OF UP TO \$10,000. (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003.)**

Proof of Identity is copied on the back of this form.