

| Anyone may buy a <b>noncertified death record</b> for a Minnesota death. Printed on plain paper, noncertified death records are for informational use only. |  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
|---|--|--|----------------------|--|--|-------------|----------------------------------|---|-----------------|----------------------------|----------------|--|
| MANDATORY: Information about the deceased person - used to locate the requested death record  |  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| son   | Deceased person's first name (required) Deceased person's first name (required)                                      |  |                      | ceased person's middle name (required) Dec |  |             | Deceased person's last name (req |   |                 | required                   | d) Name suffix |  |
| ceased  | ate of death [MM/DD/YYYY] (required) Da  |  |                      | Date of birth [MM/DD/YYYY] or Age          |  |             | City of death                    |   |                 | County of death (required) |                |  |
|   | First parent's name  |  | Second parent's name |  |  | Spouse on r |                                  |   | record (if any) |                            |                |  |
| The i   | information in this section is REQUIRED if you are sending your application to a vital records office by mail or fax |  |                      |  |  |             |                                  |   |                 |                            | mail or fax    |  |
| r   | Requester name (please print)  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| Requester   | Mailing address - UPS will not deliver to PO boxes or APO addresses  |  |                      | or APO addresses.                          | Apt/Unit #   | Ci          | City                             |   | State 2         |                            | ZIP            |  |
| 4   | Daytime phone Ema  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| Request information Fee Subtotals   |  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| One noncertified death record costs \$13  |  |  |                      |  |  |             |                                  |   | \$13            | \$13                       |                |  |
| Additional copies are \$6 each <i>if you buy them when you purchase one at \$13</i> .   |  |  |                      |  |  |             |                                  | copies  | x \$6           |                            |                |  |
| Fees are due with the application and are non-refundable. <i>Minnesota Statutes, section 144.226</i> .  |  |  |                      |  |  |             |                                  | Amount due<br>Write in total if filling out by hand |                 |                            |                |  |
| How do you want to pay?   |  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| □ c   | redit card   | We will contact you if you wish to pay by credit card. |                      |  |  |             |                                  |   |                 |                            |                |  |
| Mast  | terCard/VISA/Discover  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| Check   |  |  |                      |  | Make check or money order payable to Redwood County Recorder and send by mail with application. DO NOT SEND CASH.  |             |                                  |   |                 |                            |                |  |
| Money order Money order #   |  |  |                      |  | Checks returned for non-payment will result in a \$30 charge to you.<br>You could also face civil penalties.<br><i>Minnesota Statutes, section 604.113, subdivision 2.</i> |             |                                  |   |                 |                            |                |  |
| If you have <b>questions about this form</b> , contact <b>amy_g@co.redwood.mn.us</b> or 507-637-4032.   |  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| Mail your application and payment to:   |  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| Redwood County Recorder   |  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| PO B  | lox 130  |  |                      |  |  |             |                                  |   |                 |                            |                |  |
| Redwood Falls, MN 56283<br>Phone: 507-637-4032 / Fax: 507-637-4064  |  |  |                      |  |  |             |                                  |   |                 |                            |                |  |