

VITAL RECORD REQUEST

OFFICE OF ARENAC COUNTY CLERK
NANCY A. SELLE
120 NORTH GROOVE STREET, STANDISH, MICHIGAN 48658
PH: 989-846-4626

FIRST CERTIFIED COPY: \$15

EACH ADDITIONAL CERTIFIED COPY: \$5

WHAT TYPE OF RECORD ARE YOU REQUESTING?			
☐ BIRTH CERTIFICATE		☐ DEATH CERTIFICATE	
☐ MARRIAGE LICENSE		☐ DD214	
WHO IS REQUESTING THIS RECORD?			
☐ PERSON NAMED ON RECORD		☐ PARENT NAMED ON RECORD	
☐ LEGAL REPRESENTITIVE/GUARDIAN		OTHER	
INFORMATION ON RECORD			
NAME ON RECORD	SECOND NAME ON RECORD		ON RECORD (MARRIAGE)
DATE OF RECORD F	PHONE NUMB	ER	NUMBER OF COPIES
PERSON REQUESTING RECORD- PRINTED		SIGNATURE	

*IF MAILING IN, PLEASE INCLUDE PHOTOCOPY OF ID, ADDRESS, CHECK OR MONEY ORDER