GRANTING PERMISSION TO A THIRD PARTY ADULT TO OBTAIN BIRTH CERTIFICATE

An adult may authorize another adult 21 or older to obtain his or her own Birth Certificate or that of his or her minor child (18 and under)

1. Authorizing adult must complete the form below
2. Authorizing adult must provide own ID to notary and have form notarized
3. Either fax this completed form to 317-221-2411, or give it to the authorized adult to present at the time of request
4. The authorized adult must present current and acceptable ID and provide payment at the time of request.

Date: ____________________

I __________________________________ authorize ________________________________________ to apply for and obtain the following

<table>
<thead>
<tr>
<th>Authorizing Adult</th>
<th>Person Authorized to receive certificate</th>
</tr>
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</table>

Marion County birth certificate:

<table>
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<tbody>
<tr>
<td></td>
<td></td>
<td>☐ Male</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Female</td>
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</tr>
</tbody>
</table>

5. Place of birth, City: County: State: Hospital:

6. Full name of father: Father’s State of Birth:

7. Full maiden name of mother: Mother’s State of Birth:

Name __________________________________ Address __________________________________ City/State/Zip __________________________________ Phone Number __________________________________

Relationship to person named on certificate. Check appropriate box.
☐ Self; you are the person named on the record.
☐ Parent(s) of person named on the record (if parent named on record).

I hereby swear or affirm that the above statements are true and correct.

Signature of Authorizing Adult

HAVE THE SECTION BELOW COMPLETED BY A NOTARY PUBLIC

Subscribed and sworn to before me this ___________ day of _____________________________, 20_________ by

______________________________, who produced the following identification, (check the applicable box.)

☑ Valid driver’s license ☐ Valid state ID card ☐ Valid military ID card ☐ Valid passport ☐ Other

Issued by ____________________________, with the identification number of ___________________________ expiring ______________.

(State or government agency issuing the ID) NOTARY (Identification number printed on ID) (Expiration date)

My commission expires: ___________, 20____.

SEAL _____________________________ (Signature of Notary Public and Commission Number) HERE
9 Method to authorize someone to pick up BC 20130619 (2)