CARRIE ARRINGTON - ARANSAS COUNTY CLERK
2840 HWY 35 N - ROCKPORT, TEXAS 78382
361-790-0122 - Office / 361-790-0119 - Fax

APPLICATION FOR A CERTIFICATION AS TO FACT OF BIRTH

(No white out, strike-through, write over, or any alterations will be accepted on this Application.)

A Certification letter is a letter that certifies to the fact that a birth was filed.
It is not a certified copy of a birth record.

(Please Print)

1. Full Name of Person on Record: _____
First Middle Last

2. Date of Birth: ____/____/____ 3. Sex: Male or Female
Month Day Year

4. Place of Birth: _____ Aransas County, Texas
City or Town

5. Full Name of Parent 1: _____
First Middle Last/Maiden

6. Full Name of Parent 2: _____
First Middle Last/Maiden

7. Your Name: _____ 8. Telephone: ____/____/_____

9. Mailing Address: _____
Street Address City State Zip

10. If certified copy is to be mailed to some other person, please complete: (Mail Order Only)
Name: _____ Street Address: _____
City: _____ State: _____ Zip: _____

11. Your Signature: _____ Date: _____

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

Office Use Only

Applicant's ID: _____

Please return completed Application and money order to: **Aransas County Clerk**
2840 Hwy 35 N
Rockport, Tx 78382

****Photo ID Required**** ****Fee: $23.00**** ****Money Orders Only****