South Dakota Application for Vital Records County Birth Addendum

FALL RIVER/OGLALA LAKOTA COUNTY ROD 906 N RIVER STREET HOT SPRINGS SD 57747 605-745-5139

This form is used if you want to order more than one type of Vital Record (for example, a birth record and a death record). Please make sure to complete Sections 1 and 2 (and Sections 3 or 4 if applicable) on a birth, death or marriage record application and use this form to order additional types of records.

I R T H R E C O R D	FIRST NAME	MIDDLE NAME	LAST NAME
	# OF COPIES GENDER (\$15 per copy) Male Female	DATE OF BIRTH	CITY AND/OR COUNTY OF BIRTH
	MOTHER'S FIRST NAME	MIDDLE NAME	MAIDEN NAME/NAME PRIOR TO FIRST MARRIAGE
	FATHER'S FIRST NAME	MIDDLE NAME	LAST NAME
TYPE OF COPY		RELATIONSHIP - This area must be completed to receive a certified copy	
Certified Certified Photostatic Informational Informational Photostatic -See Eligibility in the instructions		Self Chi Current Spouse Gua Parent	Grandparent, grandchild over 18 or sibling only Designated Agent (Please complete section 4) Funeral Director, Attorney or Physician Personal or Property Right Record over 100 years
I RTH RECOR	FIRST NAME	MIDDLE NAME	LAST NAME
	# OF COPIES GENDER (\$15 per copy)	DATE OF BIRTH	CITY AND/OR COUNTY OF BIRTH
	MOTHER'S FIRST NAME	MIDDLE NAME	MAIDEN NAME/NAME PRIOR TO FIRST MARRIAGE
	FATHER'S FIRST NAME	MIDDLE NAME	LAST NAME
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☐ Certified ☐ Certified Photostatic ☐ Informational ☐ Informational Photostatic -See Eligibility in the instructions		Self Chil Current Spouse Gua Parent	Grandparent, grandchild over 18 or sibling only Designated Agent (Please complete section 4) Funeral Director, Attorney or Physician Personal or Property Right Record over 100 years