



Fulton County  
Health Dept.

# APPLICATION FOR SEARCH OF DEATH RECORD FILES

FOR FULTON COUNTY DEATHS ONLY

NAME OF DECEASED (First, Middle, Last)

DATE OF DEATH (Month, Day, Year)

## *INDIVIDUAL REQUESTING COPIES*

PRINT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_

YOUR RELATIONSHIP TO PERSON \_\_\_\_\_

### **IMPORTANT**

Fulton County Health Department has death records for the year 2005 to current. Prior records may only include name of deceased, place of death and date of death. Death records are not public records and are only available to those who have a personal or property right interest with the decedent. If you are not a relative of the deceased person, a letter or document from the office or agency that needs the death certificate must accompany the request.

The fee for a death record is \$15.00 Additional copies are \$12.00 each.

**THIS FORM MUST BE COMPLETELY FILLED OUT AND READABLE.**

**PLEASE RETURN THIS FORM WITH PAYMENT TO:**

**FULTON COUNTY HEALTH DEPARTMENT  
700 EAST OAK STREET, CANTON, IL 61520**

**Amount enclosed \$ \_\_\_\_\_ for \_\_\_\_\_ total copies Date: \_\_\_\_\_**

DO NOT SEND CASH

Make check or money order payable to: Fulton County Health Department