



## Summers County, West Virginia Death Certificate Request Form

Name of person on the certificate: \_\_\_\_\_ Date of Death: \_\_\_\_\_

Place of Death: City/Town: \_\_\_\_\_ Sex: \_\_\_ Male \_\_\_ Female

**Parents Names:**

Mother (Maiden) \_\_\_\_\_

Father \_\_\_\_\_

**Requestor's Relationship:**

\_\_\_ Parent/Grandparent    \_\_\_ Guardian or agent    \_\_\_ Spouse    \_\_\_ Brother/Sister

\_\_\_ Mother-in-law, Father-in-law, Son-in-law, Daughter-in-law    \_\_\_ Child/Grandchild

\_\_\_ Stepmother, Stepfather, Stepchild    \_\_\_ other (describe) \_\_\_\_\_

**By my signature, I certify that the above marked relationship is true.**

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(printed name)

Enclosed is \$ \_\_\_\_\_ for \_\_\_\_\_ copies (\$5.00 per copy).  
Please send check or money order. Do not send cash.

**Return copies to (Requestors address):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
City                      State                      Zip

Daytime telephone number (    ) \_\_\_\_\_

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**Mail completed form to:**

**Summers County Clerk  
Attn: Vital Registration  
120 Ballengee Street  
Hinton, WV 25951  
(304) 466-7104**