SWORN STATEMENT INSTRUCTIONS

- Only one sworn statement is required for multiple records.
- Sworn statements are not required for informational copy requests.
- Authorized individuals must complete the top portion of the sworn statement by signing and identifying their relationship to person listed on certificate.
- Sworn statements must be notarized for authorized copy requests. Law enforcement, governmental agencies, and funeral establishments (death records only) are exempt from the notary requirement, but must complete the top portion of the sworn statement page.
- A sworn statement notarized by a foreign notary must have an apostille attached. Foreign
 notarizations obtained by an Ambassador, Minister, Consul, Vice Consul or Consular Agent of the
 United States, or from a Judge of Court of record having a seal in a foreign county do not require
 an apostille.

RELATIONSHIP TO REGISTRANT

List of Authorized Persons:

- The registrant or a parent, legal guardian, child, grandparent, grandchild, sibling, spouse, or domestic partner of the registrant.
- A party entitled to receive the record as a result of court order or an attorney or licensed adoption agency seeking the birth record in order to comply with the requirements of Section 3140 or 7603 of the Family Code. (Please include a copy of the court order.)
- A member of a law enforcement agency or a representative of another governmental agency, as provided by law, who is conducting official business. (Companies representing a government agency must provide authorization from the government agency.)
- Any person or agency empowered by statute or appointed by a court to act on behalf of the registrant or the registrant's estate (Include a copy of the power of attorney or documentation identifying you as executor.)
- An attorney representing the registrant or the registrant's estate.
- Any agent or employee of a funeral establishment who acts within the course and scope of employment and on behalf of persons specified in HSC § 7100 (a) (1)-(8).
- Surviving next of kin (As specified in HSC § 7100).

VS 20 (7/24) Page 1 of 2

SWORN STATEMENT	
I,, declard (Applicant's Printed Name)	e under penalty of perjury under the laws of the
State of California, that I am an authorized person, a	s defined in California Health and Safety Code Section 103526
(c), and am eligible to receive a certified copy of	f the birth, death, or marriage certificate of the following
individual(s):	
Registrant (Name of person whose certificate you are requesting)	Applicant's Relationship to Registrant (Must be an authorized person)
(The remaining information must be Subscribed to this day of, 20 (Day) (Month)	completed in the presence of a Notary Public.), at
	(Applicant's Signature)
CERTIFICATE O	F ACKNOWLEDGMENT
who signed the document to which this certi	this certificate verifies only the identity of the individual ficate is attached, and not the truthfulness, accuracy, or of that document.
State of	
Onbefore me,	, personally appeared, tle of the officer)
·	ence to be the person(s) whose name(s) is/are subscribed
	ne that he/she/they executed the same in his/her/their
	signature(s) on the instrument the person(s), or the entity
	the instrument. I certify under PENALTY OF PERJURY under
the laws of the State of California that the foregoin	
(SIGNATURE OF NOTARY	WITNESS my hand and official seal. (SEAL) PUBLIC)

