



DEFERRED ACTION for CHILDHOOD ARRIVALS - DACA

Record Request TOOLKIT





Acknowledgements

MALDEF would like to thank the Bill and Melinda Gates Foundation for its generous support in the creation of this toolkit.

This guide is made possible thanks to the work conducted by MALDEF's Washington, DC staff attorneys, including Andrea Senteno, Adam Fernandez, Ernie Dominguez, and Burth Lopez, and former administrative assistant, Geraldine Alonso Gheresi; former MALDEF DC Regional Counsel, James Ferg-Cadima; former MALDEF staff attorney Jose Magaña-Salgado; former law clerks Jessica Levin, Amanda Lopez, Breanne Long, Jocelyn Rivera, and Philip "PJ" Velez; and former policy interns Jesus Vasquez-Cipriano, Daniel Espinoza and Valeria Sandoval. Additional thanks go to the MALDEF Community Education and Leadership Development department for their contributions.



Legal Disclaimer

The information contained in this toolkit is gathered from a number of sources and while it is believed to be generally accurate, neither MALDEF (Mexican American Legal Defense and Educational Fund) nor any volunteer attorney using this toolkit gives any guarantee or assurance of the accuracy or completeness of any particular information contained in this toolkit. The information provided is for general guidance and reference purposes only, and it is not intended to serve as, nor can it be relied upon as, legal advice to address any specific situation.

This toolkit does not create any attorney-client relationship with MALDEF. Due to the complexity of deferred action and the intricacies of the immigration system, potential applicants (1) with criminal backgrounds; (2) with previous contact with immigration authorities; or (3) who may have committed fraud upon entry, should contact a licensed immigration attorney before applying for deferred action.

You may download the latest version of this toolkit at: <http://www.maldef.org>.



Deferred Action for Childhood Arrivals

While this toolkit provides guidance on records and evidence submission, ultimately, any evidence submission must conform with U.S. Customs and Immigration Services' (USCIS) official guidance, which may be updated after the date of publication of this toolkit. You may view and download official USCIS guidance here:

General Information:

www.uscis.gov/childhoodarrivals

Frequently Asked Questions:

<https://www.uscis.gov/humanitarian/consideration-deferred-action-childhood-arrivals-process/frequently-asked-questions>

Form I-821D and Instructions: www.uscis.gov/i-821d

Form I-765, I-765 Worksheet, and Instructions:

<http://www.uscis.gov/sites/default/files/files/form/i-765.pdf>

<http://www.uscis.gov/sites/default/files/files/form/i-765ws.pdf>

<http://www.uscis.gov/sites/default/files/files/form/i-765instr.pdf>

Table of Contents

1. Executive Summary	01
2. Introduction	02
3. Model Letters in This Toolkit	04
4. Official Electronic Forms in This Toolkit	07
5. Evidence Checklist	08
6. Affidavits and Physical Presence	13
7. Credit Reports	16
8. Educational Records: School Records	18
9. Educational Records: Demonstrated Effectiveness and Non-Profit Institutions	21
10. Educational Records: Migrant Students	23
11. Employment Records	25
12. Financial Records	27
13. Health Records	29
14. Vital Records	31
15. State Agency Records	33
State Freedom of Information Act Request (FOIA)	33
State Tax Records	34
16. Federal Agency Records	35
Federal FOIA	35
Armed Forces Records	37
U.S. Census Bureau Records	38
Department of Homeland Security and Sub-Agency FOIA	40
Internal Revenue Service Tax Records	46
Selective Service Registration	48
17. Criminal Records	50
18. Other Records	58
19. Appendices	59



MALDEF

The Latino Legal Voice for Civil Rights in America.



Executive Summary

The toolkit contains model letters that applicants can complete electronically or by hand, including letters to request records from various institutions and government agencies. The toolkit also contains model letters that applicants can give to third parties to complete on their behalf, including letters for educational programs verifying their demonstrated effectiveness (Appendix D), employers verifying employment history (Appendix F), and an affidavit template (Appendix A). The toolkit provides helpful instructions to complete these letters, along with other types of request forms. The toolkit also includes a list of types of evidence that applicants and practitioners can submit in support of a DACA application under “List of Sample Records” (Page 8).

Since many institutions and government agencies require you to use specific forms for your record requests, this toolkit includes many of the most commonly used forms in the appendix – we suggest you review them to make the process easier for you because most forms can be accessed through the links provided in order to complete electronically and then printed for submission.

The toolkit



The toolkit contains background information, detailed instructions, and – if applicable – the necessary forms or model letters needed to request educational, employment, financial, health, vital, state agency, federal agency, and other records. The toolkit also includes a section on requesting vital records, such as birth certificates.



For the purposes of this toolkit, “evidence” and “records” are used interchangeably. “Applicants” refer to individuals submitting requests for deferred action under DACA.



Introduction

Few people disagree that our nation's immigration system is deeply broken. Yet in spite of this widespread agreement shared by business, religious, grassroots, civil rights, and Latino communities, Congress has failed to reform our nation's dysfunctional immigration system and address the eleven million undocumented immigrants living in the U.S. today. During the 113th Congress, the Senate passed S.744, the Border Security, Economic Opportunity, and Immigration Modernization Act of 2013 on June 27, 2013, but progress stalled as the House of Representatives failed to consider a single piece of immigration legislation. Today, the debate in Congress has been too often focused on divisive anti-immigrant proposals that seek to demonize immigrants and their families.

As a result of Congress's inaction, President Obama directed his administration to exercise its executive authority to fix portions of the immigration system. On June 15, 2012, the Administration announced Deferred Action for Childhood Arrivals (DACA), under which the Department of Homeland Security (DHS) allows undocumented immigrants who entered the country before the age of 16 and meet a series of other requirements, to apply for two-year periods of deferred action that provides protection from deportation and employment authorization.


On November 20, 2014, the Administration announced another series of executive actions to do more to address our immigration system's critical flaws, including the creation of Deferred Action for Parents of Americans and Lawful Permanent Residents (DAPA). DAPA would work similarly to DACA, and would have provided deferred action and employment authorization for undocumented immigrants who have U.S. citizen or lawful permanent resident (LPR) children and meet certain other criteria. The Administration also expanded the DACA program so that those who were otherwise eligible but were barred from the program because they were older than 31 years old when DACA was announced would have been allowed to apply.

Currently, the President's executive actions expanding the number of people eligible for relief under DACA and the creation of DAPA are being challenged in the lawsuit *United States v. Texas*. In June 2016 the Supreme Court issued a 4-4 decision that left in place a lower court block of DAPA and expanded DACA. While it is still recommended that individuals use this time to collect documents in support of an application for DAPA or expanded DACA, particularly given the length of time it may take to collect all the necessary evidence, it remains unknown how long it may take for this litigation to be fully resolved. However, DACA in its original form is still in effect, and those who are eligible may continue to apply and renew their DACA status.

To qualify for DACA individuals must submit a variety of evidence and records to prove that they meet the different requirements, including evidence of physical presence, biographical information, family relations, education, and other criteria. However, these personal records may have been lost or are kept with non-governmental institutions, or with local, state, and federal government agencies. Untangling the procedure to request these records can be very difficult – especially for someone who may have little to no experience drafting written requests in English or with finding resources that are often scattered across hundreds of different offices, websites, and locations. Moreover, the DAPA population may have had more experience in the underground economy, where the absence of recordkeeping may make it even more difficult to collect all the necessary evidence for their application.

In order to help individuals pull all of this information together on their own, MALDEF developed this toolkit to ensure that all undocumented immigrants who may be eligible for affirmative relief are also able to identify and obtain critical records to request and receive affirmative relief. Congress must act to reform our immigration system. In the meantime, however, MALDEF and others will act to ensure that administrative relief is available – and accessible – to as many people as possible.

3. Model Letters in this Toolkit



Many local, state, and federal agencies require that the request for records must be in writing. Often, laws and regulations may require that certain information be included in the request being made. In other instances, you may be asking another person, organization, or institution to complete letters on your behalf. These "third party letters" must contain certain information in order for USCIS to accept these letters as evidence in support of your application. To simplify the process, this toolkit contains both types of model letters to assist you in obtaining your records:

A

Requestor Letters.

The toolkit includes model letters that you complete and send to a state, local, or federal agency to request records (e.g. model letters for Health Insurance Portability and Accountability Act (HIPAA) requests, Family Educational Rights and Privacy Act (FERPA) requests, or state Freedom of Information Act (FOIA) requests);

B

Third Party Letters.

Third party letters are model letters that you provide to a third party to complete on your behalf (e.g. model letters for affidavits, demonstrated effectiveness verification, and employment verification).

A close-up photograph of a hand holding a silver ballpoint pen, ready to write on a document. The background is a solid blue color.

Model Letters in this Toolkit

Government agencies, educational or medical institutions, and other third parties may take a long time – up to several months – before providing you the records you are requesting. Therefore, you should give yourself plenty of time to make these requests.

For your convenience, you can print the model letters and complete them by hand. For third party letters you can provide a printed copy of the letter to complete and return to you.

You may access this toolkit by visiting:
<http://www.maldef.org>.

1. Completing Forms Electronically

- a. Open the form using a PDF viewer;
- b. Complete all required fields;
- c. Include additional sheets if necessary and include your contact information on each sheet;
- d. Sign the form electronically; and
- e. Save the form electronically and keep a copy for your records.

2. Completing Forms by Hand

- a. Open the form using a PDF viewer;
- b. Print the form;
- c. Complete all required fields using ink;
- d. Include additional sheets if necessary and include your contact information on each sheet;
- e. Sign the form; and
- f. Make a copy of the form for your records.

3. Sending Forms Electronically**a. Forms Completed Electronically:**

- i. Scan copies of supporting documentation and convert to PDF, PNG, or similar format; and
- ii. Send form and supporting documentation by email or through internet website.

b. Forms Completed by Hand:

- i. Scan copies of supporting documentation and convert to PDF, PNG, or similar format;
- ii. Scan completed form and convert to PDF, PNG, or similar format; and
- iii. Send form and supporting documentation by email or through internet website.

4. Sending Forms by Physical Mail or Fax**a. Forms Completed Electronically:**

- i. Make copies of supporting documentation;
- ii. Print form completed electronically; and
- iii. Send form and supporting documentation by physical mail or fax.

b. Forms Completed by Hand:

- i. Make copies of supporting documentation; and
- ii. Send form and supporting documentation by physical mail or fax.

4

Official Electronic Forms in This Toolkit

Some institutions and government agencies – in addition to accepting letters – provide official forms that you may use to request your records. However, some may require that you use an official form to request your records. For example, you can send a Freedom of Information Act (FOIA) request to federal agencies using a written letter. But, many federal agencies – such as the Department of Homeland Security (DHS) – have official forms that you can also use (Form G-639). Meanwhile other agencies, such as the International Revenue Service (IRS), require you to use a specific form (Form 4506-T) to request your records and will not accept written letters.

It is usually better to use the official form provided by the institution or government agency, whether it is mandatory or not. These forms are part of a uniform, simplified process that helps make sure you provide all the relevant and necessary information in your initial request. Using the official form can help move your request more quickly, and decrease the need for follow-up by the agency or entity.

For your convenience, the official forms for some of these institutions and government agencies are included in the appendix to this toolkit. Most of these forms can be filled electronically or by hand. In some cases, some official forms may not be fillable electronically through this toolkit because of security protections by the agency. If you would like to fill these forms out electronically, you should download the original form from the official government agency website. To complete these forms, please follow the instructions provided by the institution or government agency on the form or official website.

5. Evidence Checklist

The checklist below is a sample list of the types of evidence that you may submit with your request for deferred action in order to prove identity, entry date (that you entered before your 16th birthday), physical presence on June 15, 2007, continuous presence (meaning you continuously resided in the United States since at least June 15, 2007), absence of lawful status on June 15, 2007, educational enrollment or achievement, criminal history, and other requirements. Some evidence may be used to satisfy multiple categories. The list also includes cross-references to instructions in this toolkit on how to get certain documents.

You should consult with a licensed attorney before submitting records related to criminal history, as these records may negatively affect your application for deferred action. You may submit evidence verifying your parents' address (e.g. leases, rental agreements), as long as you also submit other evidence connecting you to the address.

The list below is a comprehensive list of suggested documents. You may submit any record that you think is relevant to proving eligibility for deferred action, even if not on this list.



Educational Records (See Sections 8, 9, and 10)

- Attendance Records
- Certificate of Passage of State-Authorized Exam
- Certificates or Awards
- Class Schedules
- College or University Diploma
- Correspondence from Educational Institutions
- GED Certificate
- Graduate School Diploma
- High School Diploma or Equivalent
- Individual Education Program Records
- Library Card
- Permanent Record Cards
- Progress Reports
- Report Cards
- Scholarship Letters
- Standardized Test Records
- Transcripts
- Vocational, Technical,
or Career Training Diploma or Equivalent
- Yearbooks

Electronic Records

- Digital Purchases (Apps, video games, Netflix etc.)
- Email Correspondence
- Online Chat Transcripts
- Social Media Location Check-ins
- Social Media Pictures
- Social Media Posts (Facebook, Twitter, etc.)
- Timestamped Photographs
- Timestamped Recordings
- Timestamped Videos

Employment Records (See Section 11)

- Check Stubs
- Commercial, Business,
or Professional Licenses or Certifications
- Correspondence from Banks and Firms
(Self-Employment)
- Correspondence from Employer
- Employer Verification Letter
- Employment Contracts
- Resignation, Layoff, or Termination Notices
- W-2 Forms

Financial Records (See Sections 12, 15, and 16)

- ATM Receipts
- Bank Statements
- Brokerage or Investment Documents
- Collection Notices
- Correspondence from Financial Institutions
- Credit Reports
- Federal Tax Return (page 46)
- Loan Documents
- Money Order Receipts
- Mortgage Documents
- State Tax Returns (page 34)

Judicial and Enforcement Records

(See Sections 15, 16, and 17)

- Civil Complaints or Lawsuits
- Civil Judgments
- Court Transcripts
- Final Dispositions
- Local, State, or Federal Records of Arrests and Prosecutions (Rap Sheet)
- Mortgage Documents
- Moving Violations
- Police Reports
- Protection or Restraining Orders
- State Tax Returns (page 34)
- Traffic Tickets or Citations

Property Records

- Cellphone Invoices
- Correspondence from Utility Companies
- Deeds for Personal Property
- Deeds for Real Property
- Earnest Money Contract for Real Property (house, condo, etc.)
- Lease or Rental Contract for Personal Property (vehicles, equipment, etc.)
- Lease or Rental Contract for Real Property
- Property Tax Records
- Receipts or Invoices for Purchases
- Utility Invoices

Health Records

- Community Clinic Records
- Correspondence from Health Insurance Company
- Correspondence from Hospital
- Correspondence from Medical Provider
- Dental Records

5. Evidence Checklist

Health Records (cont'd)

- Emergency Room Records
- Gym Memberships
- Health Insurance Policies
- Hospital Records
- Immunization Records
- Letter from Treating Physician
- Medicaid Records
- Medical History
- Medical Service Records
- Medicare Records
- Prescriptions
- Social Security Disability or Income Documents
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Documents
- Supplemental Nutrition Assistance Program (SNAP) Documents
- Temporary Assistance for Needy Families (TANF) Documents
- Vaccination Records

Identification Documents (See Sections 14 and 16)

- Alien Registration Number
- Birth Certificate
- Foreign Identification
- Foreign Passport
- Individual Tax Identification Number (ITIN)
- Military Identification
- National Identity Document (e.g. Matricula Consular)
- Notarized Documents
- School Identification
- Social Security Number (SSN)
- U.S. Driver's License

Insurance Records

- Health Insurance Records
- Homeowner's Insurance Records
- Life Insurance Records
- Renter's Insurance Records
- Travel Insurance Records
- Vehicle Insurance Records

Immigration Records (See Section 16)

- Advance Parole Documents
- Form I-94, I-94W, or I-95
- Notices to Appear
- Orders of Removal
- Passport with Admission Stamp
- Previous Immigration Petitions

Military Records

- Certificates of Release or Discharge
- Military Health Records
- Military Personnel Records
- Report of Separation Forms
- Selective Service Registration

Other Records (See Sections 16 and 18)

- Census Records (page 38)
- Affidavits
- Congressional Record
- Dated Correspondence
- Dated Photographs
- Day Care or Childcare Records
- Postmarked Letters
- Receipts or Invoices for Services
- Veterinary Records

Religious Records

- Baptism Certificate
- Correspondence from Church
- First Communion Certificate
- Religious Marriage Certificate

Travel Records

- Airline Rewards Programs
- Bus Tickets
- Car Sharing Records
- Driving Records
- Flight Itineraries
- Hotel and Motel Receipts
- Plane Tickets
- Rental Car Receipts
- Vehicle Emissions Documents
- Vehicle Registration

Vital Records (See Section 14)

- Birth Certificate
- Custody Agreement
- Divorce Certificate
- Marriage Certificate
- Guardianship Documents
- Power of Attorney

6

6. Affidavits and Physical Presence

1

What is an affidavit?

It is a written statement of facts voluntarily made by an individual. It is not necessary to notarize an affidavit for your DACA application, according to USCIS.

2

What is it used for?

To prove your five years continuous residence requirement - OR-
To prove that if you left the country, it was only for a short period of time.

3

Appendix Form

Please find a model affidavit in **Appendix A**

If you chose to provide your own affidavit be sure to include:

1. Full legal name;
2. Address;
3. Telephone number;
4. How the person knows you;
5. Dates he/she knew you were in the country and how she/he knows it; and
6. Signature and Date.

Relevant Resources

Appendix A:

Model Affidavit (Physical Presence Records)

An affidavit is a written statement that someone makes voluntarily. Sometimes it may be required to be notarized, meaning signed in front of a notary public. For the purposes of requesting DACA, at the time of publication of this toolkit, USCIS does not require that an affidavit be notarized; the affidavit may instead simply be signed by the person writing the affidavit.

NOTE:

A notary public in the United States is not a licensed legal representative. A notary public is simply someone who is certified to verify that a document has been signed in their presence by the signer.

USCIS allows DACA applicants to submit an affidavit only to help prove the following two elements below. In this way, the affidavit can possibly support a DACA application where even with other proof there are still gaps in evidence.



Demonstrating that an applicant meets the five-year continuous residence requirement (i.e., that you were in the country during the required period); or



Establishing that departures during the required period of continuous residence were “brief, casual and innocent” (i.e., that anytime you left the country it was for a short period of time and you were not leaving permanently).

If you choose to submit an affidavit to satisfy one or more of the above criteria, then you must submit at least two, if not more, affidavits sworn to or affirmed by someone you know (meaning you cannot submit an affidavit you wrote yourself). The author of the affidavit must be someone who has direct personal knowledge of the events and circumstances of the applicant.

USCIS **will NOT** accept affidavits as evidence that the applicant meets: 1) the educational requirement; 2) physical presence on June 15, 2012; 3) entry to the United States before an individual’s 16th birthday; 4) age; or 5) criminal history check. If an applicant only submits an affidavit and no other evidence, USCIS will issue a Request For Evidence (RFE) asking the applicant to submit additional evidence or else risk denial of her application.



Affidavits and Physical Presence

Instructions for Model Affidavit

This toolkit contains a model affidavit located at Appendix A. Individuals completing the model affidavit on behalf of an applicant may complete and submit this affidavit instead of preparing their own affidavit. Individuals must complete all relevant fields, including: full legal name; address; telephone number; how he or she personally knows the applicant; dates he or she knew the applicant was in the country and the basis for that knowledge; signature; and date. Sections 3(b) through 3(d), and 4 are optional and included for additional date ranges or comments. The author of the affidavit must sign and date the completed form, but again, this document does not need to be signed by a notary public.

7. Credit Reports

1

What is a credit report?

A record of your previous and current financial history that may include: debts, repayments, interest rates, previous loans, or lines of credit and **can be used to show your continuous presence in the country.**

2

How can I get one?

Search online at <http://www.annualcreditreport.com>, fill it out by hand and mail it in (it is free).

TIP: If you do not have an SSN you may use your ITIN. If you do not have an ITIN leave the SSN field **blank**.

3

Appendix Form

Instructions:

1. Find **Appendix B** to complete the Annual Credit Report Request
2. Shade all three circles for all Credit Report Agencies: Experian, TransUnion, Equifax
3. Mail to address provided on the form.

Relevant Resources

Appendix B:

Form: Annual Credit Report Request Form (Credit Records)

Online Resource: Federal Portal to Request Free Credit Report



Link: <http://www.annualcreditreport.com>

Mail Request Form:



<https://www.annualcreditreport.com/manualRequestForm.action>

Online Resource: Individual Taxpayer Identification Number Information



Link: [http://www.irs.gov/Individuals/Individual-Taxpayer-Identification-Number-\(ITIN\)](http://www.irs.gov/Individuals/Individual-Taxpayer-Identification-Number-(ITIN))

Your credit report contains your credit history and is a record of your previous and current financial accounts, including debts, repayments, and outstanding accounts. Your credit history affects the interest rate that banks and other institutions charge when extending you credit, and often determines whether you are able to take out loans for homes, vehicles, and other large purchases. Your credit history tracks your borrowing and payment history, and includes bank accounts, previous loans, lines of credit, etc. Credit history can provide you with substantial evidence of your continuous presence in the country.

Your credit history is tracked by three separate credit reporting agencies: Experian, TransUnion, and Equifax. You can obtain a free copy of your credit report once every twelve months from each of these three major credit reporting companies. It is common to obtain a credit history by visiting the federal portal for the free credit report (**<http://www.annualcreditreport.com>**) and providing a Social Security number (SSN) to complete the request. However, many undocumented immigrants do not have a Social Security number and are not eligible to receive one.

Most undocumented immigrants instead have Individual Taxpayer Identification Numbers (ITINs). The online portal — and the credit reporting agencies — do not allow individuals to request and complete their credit report online using ITINs. You can, however, still request your credit history even if you only have an ITIN — or no tax identification number whatsoever — instead of a SSN. Just download the request form and print it out, complete the form by hand using your ITIN number, and mail it in. Your request will still be honored even if you do not have either a Social Security number or an ITIN; just leave the space blank and mail in the form.

To request your credit history, complete the Annual Credit Report Request form located at Appendix B with as much detail as possible. Please note that the form may only be filled by hand and not electronically. If you have an ITIN, include the ITIN in place of a SSN. If you do not have an ITIN, leave the SSN field blank. The credit reporting agencies will attempt to find your credit history using your name, current address, and other information. It is possible the agencies may be able to identify and provide your credit history even if you do not have an SSN or ITIN. On the bottom of the page, shade in all three circles for all three credit reporting agencies in order to request that all credit reporting agencies search for your records. This is helpful in the event that one of the three companies is unable to complete your request. Complete all the fields, and physically mail the form to the address provided on the form:

Annual Credit Report Request Service
P.O. Box 105281
Atlanta, GA 30348-5281



8. Educational Records: School Records

Relevant Resources

Appendix C:

Model Letter: Federal Family Educational Rights and Privacy Act (FERPA) Request (School Records)

School records can be very helpful as evidence for multiples parts of the DACA application. Applicants may use school records to prove that they satisfy the education requirements, as well as the requirements related to time and residence. In order to qualify for DACA, the applicant must show that he or she:

1. Is currently in school; or
2. Graduated or obtained a certificate of completion from high school or state equivalent; or
3. Passed a General Education Development (GED) exam or equivalent state-authorized exam; or
4. Is a veteran of the Coast Guard or Armed Forces with an honorable discharge.

Different educational institutions have different policies when it comes to keeping records and providing records to current and former students. Former and current students should ask about their school or program's policies on providing educational records. Most public schools will release records (e.g., copies of grades, registration, dates of attendance, transcripts) to a current student or former student upon request. When possible, applicants should obtain school records that are stamped or certified by the school's registrar. These records are often described as "official" (i.e., "official" vs. "unofficial" transcript).

Many schools have record retention policies that allow them to destroy part or all of a student's record after a certain period of time. If you request records from a school or program that has destroyed part or all of your file, then you can ask for official letter from the school outlining its record retention policy and explaining that they no longer have your educational records. This letter, signed by the school, can be submitted with your application to explain why part of your school records may no longer be available. Additionally, most public and private universities and colleges have online transcript request forms that allow past and current students to request an official transcript. You will want to consult with your college or university for more information.

While there are privacy protections for students' school documents under federal law, you are still entitled to access these records as a student or parent. For applicants who are minors and unable to request their own records, a parent can request school records. With some exceptions, the law provides access to records that contain information directly related to a student. See Appendix C for a model letter designed to assist you in writing to the appropriate educational institutions to obtain your own or your child's school records.

Current students should present information verifying enrollment in an academic or career training program. This includes enrollment in a public or private elementary, junior high/middle school, or high school/secondary school; a public or private college or university, or community college; a course of study to pass a General Education Development (GED) Certificate exam or other state-authorized exam; an educational or vocational program; literacy training; and an English as a Second Language (ESL) program.

If academic transcripts are not yet available, other evidence may be provided. Other documents that may be accepted include: a current class schedule with identifying information; an acceptance letter from the academic institution; a current individualized education program (IEP), as required under federal law for students with special educational needs; college acceptance letters; report cards; attendance records; or any other document that could be relevant in determining the applicant's status as a current student.

The following chart, based on materials from the Immigrant Legal Resource Center's DACA: The Essential Legal Guide, shows how to request a transcript if the applicant is currently an enrolled student; or if the applicant is a high school graduate; or if the applicant did not finish high school:

A

**Applicant is Currently Enrolled in High School
(or K-12 system)**

Request transcript directly from school office.

Complete transcript request form, if necessary.

Secure parent/guardian's signature, if under the age of 18.

FYI: A cumulative (K-12) record may be available upon request.

B

**Applicant is a High School Graduate
or Left School Before Graduating**

Contact high school, provide graduation year or last year of attendance, and request transcripts.

Complete a transcript request form, if necessary.

Call or visit the school website find out how to obtain the form.

Have proper identification ready when retrieving the transcript in person.

For college transcripts, you may simply visit your school website, or if on campus, you can visit the Registrar's office to request one in-person. Be aware that certain identification may be required when retrieving the transcript in person. Also, some universities allow students and alumni to download both unofficial and official transcripts online, so please reach out to your school for specific information. Transcript request forms do vary, but general information like date of birth, mailing address, and other identification information will be requested. Some schools charge a fee (approximately \$10-\$15) for processing a transcript request.

9

9. Educational Records: Demonstrated Effectiveness and Non-Profit Institutions

Relevant Resources

Appendix D:

Modal Letter: Demonstrated Effectiveness of Educational Program
(School Records)

Appendix E:

Modal Letter: Verification of 501(c)(3) Status Request (School Records)

As previously mentioned, DACA requires that applicants fulfill the educational requirement in order to qualify for administrative relief. For DACA applicants who are applying because they are currently enrolled in school, they should note that not all educational programs may qualify. In order to fulfill the education requirement the applicant must show that he or she is enrolled in:

1. A public or private elementary, junior high (middle), or high (secondary) school, or an alternative program or homeschooling program that meets state requirements;
2. A public or private college or university, or community college;
3. A study course to assist in obtaining a high school equivalency diploma, such as a General Education Development (GED) Certificate or other state-authorized diploma or certificate; or
4. An education, literacy, or career training program that is designed to lead to college enrollment, placement in job training, or employment.

See Section 8 for information on requesting school records.

As you consider which records you will need to demonstrate current enrollment in school, be aware that if you are applying based on enrollment in a GED or high school equivalency program or an education, literacy, or career training program – like an English as a Second Language (ESL) program – you will need to submit evidence that the program receives federal, state, county, or municipal funds. If the program does not receive public funds, it can also qualify for DACA purposes if it is run through a non-profit organization. For those enrolled in a program run by a non-profit organization, consult Appendix E for a model letter requesting verification of the organization’s non-profit status.

Lastly, if you find that your program is privately funded and not run by a non-profit organization, you must show that it is a program of “demonstrated effectiveness,” a term used by USCIS. If you are enrolled in a program that requires you to show it is of demonstrated effectiveness, know that USCIS will look at a number of factors to determine whether a program meets this standard. Factors include when the program was established, its track record in helping students obtain a GED or some other comparable certificate, its history of putting students in post-secondary educational institutions (like college or university), job training or employment, and other signs of the quality of the program. It is up to you, the DACA applicant, to show that a program is of “demonstrated effectiveness” if you are using it to show that you are currently enrolled in school. Please consult Appendix D for a model letter designed to help you write to educational programs to obtain records that would show that a program is of “demonstrated effectiveness.”

10. Educational Records: Migrant Students

Relevant Resources

Online Resource: U.S. Department of Education “Questions and Answers about Education Records”



Link: <http://www2.ed.gov/about/overview/focus/daca-education-records.pdf>

Online Resource: MSIX State-level Administrator Locator



Link: <https://msix.ed.gov/msix/LocateAnAdmin>

Some students, especially migrant students may have difficulty obtaining school records. Because education records are kept at the school the student attends or used to attended, getting records for a student who has attended a number of different schools can be challenging. In order to help, the U.S. Department of Education developed MSIX, which is an online database that allows states to connect to each other’s student record systems, exchange student records nationally, and create a “Consolidated Student Record” for migrant children who are eligible for the Migrant Education Program (MEP). All of this is supposed to make getting records for migrant students easier, even when the student has changed schools often and moved from state to state.

While a student is enrolled in MEP, the **MSIX** database should contain school records, along with biographical and demographic data. The database would also include if the student was or was not enrolled in school; dates and locations of certain moves; MEP projects; or school districts the student was enrolled in.



NOTE: The Consolidated Student Record only contains school records for when the student was enrolled in the MEP. If the student was not enrolled, the database will not have the information available. In addition, because the MSIX system relies on states to upload this information, some records may be incomplete or out of date.

note

If the DACA applicant is enrolled in MEP or was formerly enrolled, he or she can request a copy of his or her own file. In the case of minor students, parents or guardians can make the request. There are three ways to get a MSIX Consolidated Student Record:

1. **Contact local school officials at the nearest school district.**
If the school district has access to MSIX, they will verify your identity and locate the student records.
2. **Contact a state-level MSIX User Administrator.** If a school district is cannot give you a copy of the Consolidated Student Report, you can contact state administrators in any state that participates in the MEP (which include all states except for Connecticut, Rhode Island, and West Virginia).

MSIX state-level administrators can be found here: <https://msix.ed.gov/msix/LocateAnAdmin> by choosing your state and school district from the drop down menus. You may also call the MSIX Help Desk at (866) 878-9525 from 9:30am – 6:30pm Eastern Time or reach MSIX by email at MSIXSupport@deloitte.com. Once administrators identify the applicant's identity, they will locate the student records.

3. **Contact the Office of Migrant Education in the Department of Education.**
If the other two options are unsuccessful, you may contact the federal Office of Migrant Education at:

U.S. Department of Education
Office of Migrant Education
400 Maryland Avenue, SW
Washington, D.C. 20202
(202) 260-1164
msix@ed.gov

11. Employment Records

11

1

What are employment records?

These are records that show that you were self-employed or employed by someone or a company.

Recommendation: You have no obligation to inform your employer the reason you are asking for a letter verifying your employment. Be very cautious when revealing information regarding your DACA request!

2

Examples of Employment Records

Pay stubs

W-2 forms

Letters from employers

Letters from companies or banks that did business with your company.

3

How can I request it?

Use the model letter in Appendix F

1. Ask your (trusted) employer to draft a letter on your behalf and be certain it includes:
2. Employer's name;
Your full legal name;
3. Your address at the time of employment;
4. Periods of layoff (if applicable);
5. Duties with the employer;
6. Employer's contact information; and Employer's signature.

Relevant Resources

Appendix F:

Model Letter: Employment Verification (Employment Records)

Online Resource: USCIS Guidance for Employers



Link:

http://www.uscis.gov/sites/default/files/USCIS/Humanitarian/Deferred%20Action%20for%20Childhood%20Arrivals/DACA-Fact-Sheet-I-9_Guidance-for-employers_nov20_2012.pdf

Employment records are any records that show that you were either self-employed or employed by an individual or company at a given time.

Examples of these records include pay stubs, W-2 Forms, federal tax returns, state tax returns, letters from employers, or — if you were or are self-employed — letters from banks and other firms that did business with your company.

You may want to request federal and state tax returns from the relevant tax agencies, such as the Internal Revenue Service (IRS) and your state tax agency. For more information on how to get tax records see page 34 for state tax records, and page 46 for federal tax records.

You can request pay stubs, W-2, and letters directly from your current and former employers. Employers may draft their own letters or fill out the model letter located at Appendix F.

If an employer drafts a letter on your behalf, the letter must contain:

1. The employer's name;
2. Your full legal name;
3. Your address at the time of employment;
4. Exact periods of employment;
5. Periods of layoff (if applicable);
6. Duties at place of employment;
7. Employer's contact information; and
8. Employer's signature.

NOTE: You have no obligation — legal or otherwise — to explain to your employer the reason you are asking for an employment verification letter. Be very careful if or when revealing information regarding your request for DACA — and as a result, your undocumented status — to your employer. It is possible for an employer to fire you if they discover you are not authorized to work or they may fear repercussions for hiring an undocumented worker.

12

12. Financial Records

Bank records can be helpful evidence used to prove presence in the United States during a specific period or on a specific day. Most of the time, applicants can submit copies of bank statements to prove these requirements. For accounts that are closed or when banks do not provide copies of older bank statements, applicants may want to consider getting a letter from their bank confirming that they had a bank account on certain dates.

Most banks will prepare and send a letter with your full name, your current or former accounts with that bank, and the dates those accounts were opened and/or closed. For example, a person banking with Bank of America may call the customer service phone number and ask for an “immigration letter” which verifies their name, account information, and dates the account(s) were active. Bank of America would then mail this letter to the account holder. For most banks, you will likely have to submit a written request, by mail or fax, with information, including but not limited to, your account number, full name, and address. Different banks have different policies, and the best course of action is to call your bank’s customer service phone number and inquire about their policies.

12. Financial Records

If you use online banking, you should be able to view your old statements. Online statements are usually available for at least a year, and more often, for several years. If you do not use online banking or want to view older statements, most banks can give you hard copies of old statements or other records (there may be a small fee for hard copies). Old statements and bank records may include copies of cashed checks or ATM transactions. Contact your specific bank for details.

Other types of financial records include receipts for purchases of goods or services. In-store receipts are another way to help verify presence on a particular day, especially on June 15, 2012, the date DHS announced the new policy. Some major retailers – like Target, Wal-Mart, and Best Buy – keep electronic copies of receipts. If items were purchased on a debit or credit card, it may be possible for the store to retrieve a copy of your receipt. Some retailers keep this information for up to two years. If you know you made a transaction on a particular day (as indicated, for example, on your bank account or credit card statement), either visit or call the customer service department of the retailer to find out if they can help.

13

13. Health Records

Relevant Resources

Appendix G:

Model Letter: Health Insurance Portability and Accountability Act (HIPPA) Request (Medical Records)

13. Health Records

Medical records are another type of document that can be used to prove certain eligibility requirements for DACA, such as presence in the United States on certain dates. Under federal law, the Health Insurance Portability and Accountability Act (HIPAA) gives you the right to access your own medical records. Under HIPAA, medical providers, including hospitals and doctors, must provide copies of your medical records when you request them. The only exception to this rule is that medical providers may refuse to provide mental health records in some narrow circumstances. Medical providers may charge a reasonable fee for copying and mailing these records.

Providers must keep the majority of adult medical records for six (6) or more years; however this may change depending on the state. Additionally, in most circumstances, medical providers must maintain children's medical records for three (3) to ten (10) years after the child turns eighteen (18) or twenty-one (21), depending on the state. Providers may keep older records. For more information, please contact your medical provider.

Most hospitals and doctors' offices have specific departments or staff in charge of maintaining medical records, and any questions or specific requests should be directed to those individuals. Diagnostic lab tests records, such as mammograms, blood tests, CT scans, x-rays, and other records, should be requested from the physician who ordered the tests and not from the lab that ran the tests.

Some health care providers have a form you can fill out to request your medical records; otherwise, you can write a letter requesting your records. First be sure to check with your health care provider, either online or by calling their office, to see if a request form is available. See Appendix G for a model letter designed to help you write to the appropriate health care provider or facility to get your medical records, if a standardized form does not exist.



14. Vital Records

Relevant Resources

Appendix H:

State Birth Certificate Request Procedure (Vital Records)

Appendix I:

State Marriage Certificate Request Procedure (Vital Records)

DACA applicants must show proof of identity as part of the application. The document(s) provided must show identity and age, and also a photo of the applicant. An applicant may provide a birth certificate, a passport, government identification from his country of origin, any U.S. government document with a photo, a school identification card that contains a photo, a military identification card with a photo, or any other document that can show identity and age. For example, if you are submitting a birth certificate or other document to prove your age, but it does not have a photo of you, you will also need to submit some other supporting documentation that contains photo identification.

If you do not have an available copy of your birth certificate, there are a few different ways to try and obtain one. School records may contain a copy of your birth certificate, if the school required it for enrollment purposes. If that is the case, it may be possible to get a copy by requesting school records (See Section 8, School Records). Other programs that required a copy of a birth certificate when enrolling may be helpful places to look, as well. In addition, some consulates or embassies located in the U.S. may issue certified copies of birth certificates. For example, the Mexican Embassy provides records of birth certificates at U.S. embassy or consulate locations.

If you have a passport from your country of origin, this can be helpful to show identity, age, and serve as photo identification. You should contact your local consulate or embassy for more information about how to obtain a passport. For instance, the Mexican Embassy has a process for Mexican nationals in the United States to obtain a Mexican passport from their local consulate office



Link: <http://consulmex.sre.gob.mx/washington/index.php/en/component/content/article/150>

The Mexican Embassy has a hotline, MEXITEL (877-639-4835), where people can call to make an appointment or get further information.

For applicants who are pulling together documentation to show presence in the U.S. over a certain period of time or on a specific date, U.S. birth certificates or marriage certificates can be useful. For instance, a DACA applicant with U.S.-born children or who was married in the U.S. may want to use these records to help show arrival prior to 16th birthday, continuous presence, or that he or she was present in the U.S. on a certain date. See Appendix H for how to obtain a birth certificate from the state or city/town where the birth took place. Marriage certificates may also be useful in showing continuous presence or presence in the U.S. on a specific date. See Appendix I for how to obtain a marriage certificate from the state or city/town where the marriage ceremony took place.

15. State Agencies

Freedom of Information Act Request (FOIA)



Relevant Resources

Appendix J:

Model Letter: File a State FOIA Request (State Agency Records)

Online Resource: Sample FOIA Request Letters



Link: <http://www.nfoic.org/state-sample-foia-request-letters>

Each state has laws that allow individuals access to public records that are held by the state. These records may be helpful in providing evidence of continuous presence, presence on a specific date, identity, or other DACA requirements. However, the law differs state by state in what information is available upon a request. Similar to the federal version of Freedom of Information Act (FOIA), most states allow all individuals to request access to public records. Other states only grant “citizens” access to these records. Therefore, some states may require proof that you reside in that state or some other form of identification. In those cases, individuals may be required to submit proof of residency in the state in which you are submitting the request.

Different states also have different policies regarding which state agencies must respond to a state FOIA request. You should follow up with a specific agency’s website in order to determine if that agency will maintain and release the records you require. A model letter for a state FOIA request can be found in Appendix J, which may be sufficient to make a request in your state. Additionally, the National Freedom of Information Coalition provides FOIA Template Letters for all fifty states. You can view and download sample letters here:



Link: <http://www.nfoic.org/state-sample-foia-request-letters>.

Please follow up with an individual state agency’s website for specific contact information. Most states are required to provide a grant or denial of the request within a shorter time span than the federal government. As the response time may vary for different states, you will want to find the specific policies for your state.

State Tax Records

Relevant Resources

Appendix K:

Chart: How to Request State Tax Returns (State Tax Records)

Past state tax returns can be helpful as supporting evidence of continuous presence, where the applicant has records of annual income taxes paid to the state. Getting copies of past state tax returns varies by state. A majority of states have forms available online, which can be downloaded and sent by mail or by fax. Note that only a small number of states can accept and process requests for tax returns in person, over-the-phone, or by email. Please see Appendix K for links to request forms, where available, or other helpful instructions.

Keep in mind that the processing time for these types of requests can vary from a few days to up to ten (10) weeks, depending on your state. Be sure to check your state's policy and request these materials as soon as possible. Additionally, some states charge a fee for this service. When applicable, fees may be as low as \$2 per tax return or a few cents per page, but can reach up to \$20 per return or \$1 per page.

Finally, states do not keep records of tax returns indefinitely. Some states can provide tax returns only for the previous three (3) years, while others keep records for longer. Again, please check your individual state's policies.

16



16. Federal Agencies

Federal Freedom of Information Act Request (FOIA)

Relevant Resources

Appendix L:

Model Letter: Federal FOIA Request (Federal Agency Records)

Online Resource: FOIA Guide for Federal Agencies



Link: <http://www.foia.gov/report-makerequest.html>

The federal Freedom of Information Act (FOIA) is a law that gives you the right to access information from the federal government, such as information the government has about you. Any person can obtain access to federal agency records, except in certain cases where the law requires records to be kept private. You can request records from fifteen (15) different departments of the federal government and seventy-three (73) federal agencies. FOIA, however, does not apply to Congress, the federal courts, the President, or state-level departments and agencies. The first step is determining which department or agency is likely to have the records you need. FOIA requests can generally be made by email or fax. For more information about a particular agency, its functions, whether it might have a relevant record, and how to make a request with that particular agency, please visit:



Link: <http://www.foia.gov/report-makerequest.html>

Any person can make a FOIA request for records for any reason. For example, a legal guardian or parent can request records for his or her minor child. While no specific form is required to make a FOIA request, it must be made in writing and describe the information you are searching for. Please see Appendix L for a model FOIA request letter. For more detailed instructions on how to complete a FOIA request of **immigration** records held by the Department of Homeland Security and its sub-agencies, please see page 40.

Usually it takes approximately one month to receive some sort of response to a FOIA request. Often, an agency will require an extension. In the case of an extension, the agency will notify you in writing and may allow you to change the scope of your request or negotiate a different deadline. It is possible to have your request expedited if there is a health or safety issue. Please contact the relevant agency for specific information regarding timing or other questions.

Armed Forces

Relevant Resources

Appendix M:

Military Records Request SF-180 Form (Military Records)

Any military records you may have can be helpful to your application. If you were honorably discharged from the Coast Guard or Armed Forces, this can make you eligible for DACA, similar to the education requirements. You will want to provide records of your honorable discharge. In addition, military records may help you prove the continuous presence and proof of presence on a particular date elements of your application. These types of records may include DD 214/Separation documents, medical records, and other records that can be useful in your request.

Individuals may request military service records either by using the online eVetRecs System, which is the online portal for accessing veterans' service records, or by completing and filing an SF-180 Form via mail or fax to the National Archives. A copy of the SF-180 Form can be found in Appendix M. To find out how to file an online request for military records visit the Veterans Service Record portion of the National Archives Website located at:



Link: <http://www.archives.gov/veterans/military-service-records/>

U.S. Census Bureau

Relevant Resources

Appendix N:

Application for Search of Census Records BC-600 Form (Census Records)

Online Resource: U.S. Census Bureau Age Search Service Information



Link: <https://www.census.gov/topics/population/genealogy/agesearch.html>

Online Resource: U.S. Census Bureau Video, How to Obtain Your Census Record Through the Census Bureau's Age Search Service



Link: https://www.census.gov/mso/www/training/age_search_tutorial.html

One way to demonstrate continuous presence is to include Census records, where available, to show that the DACA applicant was present in a certain location during a certain year. These records can help add to the collection of documents an applicant may submit to show the applicant's continuous presence since at least June 15, 2007.

You can request your own records by going directly to the U.S. Census Bureau to request what is known as an "age search." The Census Bureau conducts a decennial census every ten years, and these records can show that you were residing in the U.S. at the time of the census count. Only the applicant, an heir, or a legal representative may obtain these records, so you or your attorney, if you have one, can make a request for your Census records. The records may contain personal information such as the applicant's age, sex, race, state or country of birth, and the relationship to the householder, such as whether you are the son or daughter or spouse of the head of household. Census Bureau requests are costly, at \$65.00 per person for each census. If you request more than one census search for yourself, you will be required to pay the \$65.00 for each one. These searches may be useful when you still have gaps in documentation where attempts to collect other sources of evidence have been unsuccessful.

To request a search of personal census records, the applicant must complete an official BC-600 form, located in Appendix N or online at:

 Link: <https://www.census.gov/history/pdf/bc-600-2013.pdf>

 Link: <https://www.census.gov/history/pdf/bc-600-2013.pdf>

For more information on filing a copy of the BC-600 form, please visit the Age Search Service portion of the U.S. Census Bureau website at:

 Link: <https://www.census.gov/topics/population/genealogy/agesearch.html>

The Census Bureau also has a video tutorial, which may be helpful in completing a request:

 Link: https://www.census.gov/mso/www/training/age_search_tutorial.html

TIP: Under the field asking for the “purpose,” the applicant should select “Other” and “personal review.”

Requests can be mailed to:

U.S. Census Bureau
P.O. Box 1545
Jeffersonville, IN 47131



Homeland Security

Department of Homeland Security FOIA

Relevant Resources

Appendix O:

DHS Freedom of Information/Privacy Act Request G-639 Form & Instructions
(Immigration Records)

Appendix P:

ICE Affirmation/Declaration Form (Immigration Records)

Online Resource: DHS FOIA Request Submission Online Form



Link: <http://www.dhs.gov/dhs-foia-request-submission-form>

Online Resource: ILRC, “A Step-by-Step Guide to Completing FOIA Requests”



Link: http://www.ilrc.org/files/documents/foiaadvisory_11.7.pdf

Online Resource: ICE Online FOIA Request Form:



Link: <https://www.ice.gov/webform/foia-request-form>

Online Resource: USCIS Submitting FOIA Requests - Record Type and Agency Chart



Link: <http://www.uscis.gov/about-us/freedom-information-and-privacy-act-foia/how-file-foia-privacy-act-request/submitting-foia-requests>

Online Resource: Customs and Border Protection (CBP) FOIA Online Request Information and Portal



Link: <http://www.cbp.gov/site-policy-notice/foia>

Online Resource: USCIS Freedom of Information Act Request Guide



Link: <http://www.uscis.gov/sites/default/files/USCIS/About%20Us/FOIA/How%20to%20File%20a%20FOIA%20Privact%20Act%20Request/USCIS%20FOIA%20Request%20Guide.pdf>

Online Resource: DOJ EOIR How to Submit a FOIA/PA Request



Link: <http://www.justice.gov/eoir/foia-facts>

Online Resource: Administrative Relief Resource Center “Bringing Clients Into Eligibility for DAPA and DACA: Getting the Facts Through FOIA and Criminal Record Review”



Link: <http://www.adminrelief.org/resources/attachment.265794>

As mentioned earlier in this Section, the federal Freedom of Information Act (FOIA) gives you the right to access information from the federal government about yourself or others. DHS and its sub-agencies keep files on individuals with whom they come into contact. These entities include Immigration and Naturalization Service (INS), Immigration and Customs Enforcement (ICE), Customs and Border Protection (CBP), Office of Biometric Identity Management (OBIM), or Citizenship and Immigration Services (USCIS). Therefore, in some cases it may be useful to obtain the your immigration records – particularly where an you have had previous interaction with INS, ICE, CBP, or USCIS – as it will give a clearer picture of what the your immigration history includes, and may have useful documents to prove presence and identity. You will want to consider which files you will need and which agency is most likely to hold those files.

In most situations, a FOIA request to USCIS will be the most useful because it is most likely to contain the applicant's entire A-file. An A-file, or Alien File, refers to those files associated with someone's Alien Registration Number, or A-number, which is assigned to a non-citizen. It includes most, if not all, immigration and naturalization records that the government has on a certain individual. In making a request for this file, you should be clear that they are seeking the entire file. If you need to know whether there are records of any expedited removal proceedings, requests to CBP or OBIM will be necessary. You may want to file FOIA requests with multiple sub-agencies in order to obtain all the records you will need.

You may submit an electronic request, which can be submitted for USCIS, ICE, and OBIM:



Link: <http://www.dhs.gov/dhs-foia-request-submission-form>

You may also use the government form G-639 to complete a request of records with USCIS, ICE, and OBIM, which is located in Appendix O or online at:



Link: <http://www.uscis.gov/sites/default/files/files/form/g-639.pdf>



Link: <http://www.uscis.gov/sites/default/files/files/form/g-639instr.pdf> (Instructions).

The online portal or the G-639 form cannot be used to obtain records from CBP.

For attorneys filing a FOIA on behalf of a client, G-639 forms will need to be accompanied with a G-28 form.

G-639 Forms

Generally, when you submit a request for files, it is best to provide as much biographical information as possible, and if a piece of information is unavailable to simply write “unknown.” In a G-639 form, you should identify the correct “Type of Request” you are making, using the descriptions provided for the different requests. Under Question 2, you would want to check that you are seeking the “Complete Alien File (A-File).” Note that while the “purpose” field is optional, some basic information may be helpful for DHS in identifying the requested file. However, it is important that you not divulge anything you do not want to make the government aware of, including immigration details or the reason you are seeking the file. The Immigrant Legal Resource Center has a helpful step-by-step guide for filling out a G-639 form, and completing other DHS and sub-agency FOIA’s:



Link: http://www.ilrc.org/files/documents/foiaadvisory_11.7.pdf

Once completed, be sure to make a copy for your files before mailing the completed form. You should mail the form to the relevant DHS agency. In certain cases, you may be able to expedite, or fast-track, your FOIA request; for instance USCIS may expedite the process for certain reasons. There are two options for expedited processing or review under USCIS.

USCIS Track 3 Requests

USCIS has three tracks for requests: Track 1 for less complex requests, Track 2 for more complex requests, such as the request of an entire file, and Track 3 for accelerated requests for individuals in removal proceedings. For accelerated Track 3 requests, you must also include in your request one of the following items:

1. **A Form I-862, Notice to Appear, showing that you are scheduled for a hearing before an immigration judge;**
2. **A Form I-22, Order to Show Cause, documenting a future scheduled date of your hearing before an immigration judge; or**
3. **A written notice of continuation of a future scheduled hearing before an immigration judge.**

If you are in removal proceedings then you may ask that your request be processed through Track 3. If you or a client you are representing is scheduled to appear before an immigration judge, USCIS recommends requesting Track 3 processing.

USCIS Expedited Requests

Aside from the Track 3 process, you may choose to ask that your FOIA request be expedited. Again, asking for expedited processing is not advised if you or your client is scheduled for an immigration hearing. USCIS may expedite the FOIA process if there is:

1. An imminent threat to an individual's life or physical safety;
2. An urgency to inform the public about an actual or alleged government activity (but only for the individual engaged in disseminating the information);
3. An impairment of substantial due process rights; or
4. A potential harm to substantial humanitarian concerns.

If you believe one of these categories applies to you, you will want to provide a detailed written explanation, with supporting documentation, as to why you should get expedited review.



NOTE: You may ask for Track 3 processing or expedited processing, **but not both simultaneously.**

Sending G-639 Form to USCIS

G-639 forms to USCIS, which is most likely to contain the necessary records, including your A-file, should be submitted to:

U.S. Citizenship and Immigration Services
National Records Center (NRC)
FOIA/PA
P.O. Box 648010
Lee's Summit, MO 64064-8010

You may also fax the form to (802) 288-1793 or (816) 350-5785, or email it to uscis.foia@uscis.dhs.gov.

Sending G-639 Form to ICE

To submit your request to ICE, you may mail the form to:

U.S. Immigration and Customs Enforcement
Freedom of Information Act Office
500 12th Street, S.W., Stop 5009
Washington, D.C. 20536-5009

You may also fax the form to (202) 732-4265, or email it to ICE-FOIA@dhs.gov.

Requests may also be made electronically using ICE's online form:



Link: <https://www.ice.gov/webform/foia-request-form>

You must also submit an "Affirmation/Declaration" form with your request when completing a FOIA request through ICE, affirming that you understand that knowingly or willingly requesting or obtaining another individual's records under false pretenses and without consent is punishable by a fine of up to \$5,000. This form can be found at Appendix P or online at:



Link: <https://www.ice.gov/doclib/about/pdf/affirmation-declaration.pdf>

Sending G-639 Form to OBIM

To submit your request to OBIM, you may mail the form to:

OBIM FOIA
245 Murray Lane, SW
Washington, D.C. 20598-0628

You may also fax the form to (202) 298-5445 or email it to OBIM-FOIA@ice.dhs.gov.

FOIA Requests to CBP

To request records from CBP, you must use the online request form available here:



Link: <http://www.cbp.gov/site-policy-notices/foia>

You cannot use the G-639 form to make a FOIA request through CBP. Be aware that requests through CBP may take longer than other agencies. It is a good idea to submit FOIA requests to other agencies that may also hold the files you are seeking in addition to any request you make to CBP.

EOIR

It is possible you may also want to request files from the Executive Office for Immigration Review (EOIR) housed within the Department of Justice. For instance, you may want to make a request to EOIR if you are seeking information about removal proceedings or a Notice to Appear (NTA) that may have been issued. To request files, you must email EOIR.FOIARequest@usdoj.gov, and in your written request include a description of the records you are seeking, with any identifying information (i.e., full name, other names used, immigration hearing location, and A-file number).



Internal Revenue Service (IRS)

Relevant Resources

Appendix Q:

IRS Request for Transcript of Tax Return 4506-T Form (Federal Tax Records)

.....

Online Resource: IRS Get Transcripts



Link: <http://www.irs.gov/individuals/article/0,,id=232168,00.html>

.....

Online Resource: IRS Get Transcripts FAQ



Link: <https://www.irs.gov/Individuals/Get-Transcript-FAQs>

.....

Your federal tax returns can be a helpful way to show continuous presence, similar to your state tax returns (discussed on page 34). These records are called tax return transcripts and include any accompanying forms and schedules. You can obtain these copies of previous tax returns you filed by contacting the IRS directly. You can request a tax transcript by:

- ◇ Calling the IRS at 1-800-908-9946;
- ◇ Ordering by mail using IRS Form 4506-T, available in Appendix Q;
- ◇ Downloading Form 4506-T here: <http://www.irs.gov/pub/irs-pdf/f4506t.pdf> ; or
- ◇ Completing on online request.

The online form is available at:



Link: <http://www.irs.gov/individuals/article/0,,id=232168,00.html>

For more information on obtaining copies of past federal tax returns, please consult the IRS's comprehensive FAQ's for obtaining a tax return transcript:



Link: <https://www.irs.gov/Individuals/Get-Transcript-FAQs>



Selective Service Registration

Relevant Resources

Appendix R:

Model Letter: Selective Service System Verification of Registration Letter (Military Records)

Online Resource: Selective Service System Online Verification of Registration

 Link: <https://www.sss.gov/Home/Verification>

The Selective Service is the system with which all males in the U.S. must register with the government in case a military or security crisis requires a draft. It does not automatically enroll an individual in the military, but it is the pool from which individuals will be randomly drawn if a draft is implemented. Nearly all men between 18 and 25 years old are required to register, including undocumented immigrants residing in the U.S.

When available, a copy of a selective service registration may be helpful evidence for your DACA request to demonstrate continuous presence or presence on a particular date. For most people, in order to obtain a Selective Service record, you must go through an online portal available here:



Link: <https://www.sss.gov/RegVer/wfVerification.aspx>

To access the portal, the applicant must provide his last name, social security number, and date of birth. A social security card is not required to register with Selective Service; however, in order to access registration records online, a social security number must have been used at the time of registration. For individuals who do not have a social security number, you may request a letter of acknowledgement of your registration either via phone or mail.

To request records information by phone, you can call (847) 688-6888. You will be asked to provide your last name and date of birth. You will be asked questions to verify your identity, and most important, will be asked to provide the mailing address that was given at the time of registration. If your address has changed, you may update your records by phone at the time of your request. You should expect an acknowledgment to be mailed to you. You should submit a copy of this acknowledgment as proof of registration and be sure keep the record in your personal files for future use.

Requests can also be made by mail, but it will take longer to receive a response. If you make a request by mail, please see the template form letter at Appendix R. Requests can be mailed to:

Selective Service System
P.O. Box 94638
Palatine, IL 60094-4636

17

17. Criminal Records

Relevant Resources:

Appendix S:

FBI Applicant Information I-783 Form (Criminal Records)

Appendix T:

FBI Credit Card Payment I-786 Form (Criminal Records)

Appendix U:

FBI Identity History Summary Request Checklist (Criminal Records)

Individuals who have committed certain crimes are ineligible for DACA under the USCIS Guidelines. These criminal bars are specific to DACA, and may not be consistent with criminal bars for other benefits or relief. An individual with a criminal history will want to consult an experienced immigration representative. Anyone with a criminal history will need to carefully consider whether they want to apply affirmatively for DACA in light of their specific circumstances. If an applicant is already in immigration removal proceedings, requesting DACA as a defense to deportation should be strongly considered, as it would not put the individual at any greater risk of removal.

There are three different categories of crimes that will automatically bar an individual from DACA:

1. A felony conviction;
2. A “significant misdemeanor;” or
3. Three or more convictions of a non-significant misdemeanor.

Rare exceptions will be made for applicants that can show “exceptional circumstances” that merit the exercise of discretion. There are a number of resources available that can help applicants and practitioners to determine whether the crime for which the applicant was convicted would be considered an automatic bar to DACA.¹

Under the Immigration and Nationality Act (INA), a conviction must meet two elements:

1. A judge or jury must find the person guilty or the person must admit guilt, plead *nolo contendere* (no contest), or admit to sufficient facts to support such a finding, and
2. The judge must order a form of punishment, penalty, or restraint on the individual’s liberty.

Thus, an arrest or criminal charge that is later dropped or dismissed would not qualify as a conviction, and would not serve as an automatic bar for the purposes of DACA. Where the individual has a criminal history, it is strongly advised that the applicant seek assistance from an immigration professional. There are a number of considerations that may be taken into account; for instance, if the individual participated in a rehabilitative program and the terms of the program, whether the conviction was expunged, or whether the conviction was sealed as a result of juvenile proceedings.

1. See *Immigrant Legal Resource Center, DACA: The Essential Legal Guide* (2nd ed. 2014).

NOTE: Another important consideration is that DACA applicants convicted of certain crimes, or who committed certain “bad acts,” even where there is no conviction, may be referred to ICE for the purpose of initiating removal proceedings, and may be ultimately removed. Any applicant with a criminal record would be advised to seek the assistance of a trusted immigration practitioner.

note

If there is any possibility that a conviction or arrest occurred, obtain the following different records:

1. FBI Identification Record/Rap Sheet
2. Client’s State Criminal Record
3. A complete copy of the record from the court where the client was arrested and/or convicted
4. Copy of any expungements

You may have a criminal conviction that has been expunged or erased. If this is the case, the DACA Standard Operating Procedures indicate that an expunged conviction will not be treated as an automatic bar for DACA; however, the information about the conviction must still be submitted and will be considered by USCIS to determine whether you pose any public safety or national security threat under the agency’s guidelines.

Rehabilitative programs are likely also to be considered similarly to expungements, since many rehabilitative relief programs will erase a criminal conviction under the relevant state law. A conviction such as a deferred entry of judgment may permit the convicted individual to withdraw a guilty plea if he or she successfully completed probation or other sentencing requirements.

Even if an individual has an expunged conviction, he or she may still be considered a public safety threat or considered undeserving of an exercise of discretion given the totality of the circumstances. This means that when all the factors are taken together someone may still be denied DACA even though his or her conviction was erased. Therefore, each applicant must carefully consider the conviction history he or she has, and those positive factors weighing in favor of granting him or her DACA.

Juvenile Proceedings

Juvenile adjudications, or cases, should be treated extra carefully. A case handled in a juvenile delinquency proceeding, meaning a proceeding for a minor that commits a criminal offense, does not automatically disqualify someone from receiving DACA, unless that minor was tried as an adult. However, these proceedings are still part of DHS's review process and are likely to be taken into consideration in the agency's decision to grant DACA. Any juvenile proceedings require extra caution, especially where the facts show that the offense would be considered a felony or significant misdemeanor by DHS. In these cases it is important to consult with an immigration practitioner.

In addition, practitioners and applicants should understand the laws in each relevant jurisdiction that prohibit disclosure of juvenile cases. Even though the I-821D DACA form makes clear that the applicant must reveal information about criminal history, including juvenile cases, and that a failure to disclose a juvenile case may be considered grounds for fraud, it is still important to check your state's confidentiality laws because some states do not allow disclosure of these juvenile proceedings in any circumstance. This is particularly important because in some states, even if you are the individual with the juvenile case, you may not be permitted to disclose your own record without court approval and the penalty for disclosure may include civil fines or even criminal charges. So you may be prevented by state law from disclosing that information in your DACA application.

In addition to state laws, federal laws may also apply, like the Federal Juvenile Delinquency Act, which includes confidentiality protections for federal juvenile proceedings.² In the same way that all criminal information for adult adjudications of an applicant should be reviewed to help determine whether applying affirmatively for DACA (so when the applicant is not in removal proceedings) is advisable, the same is true for juvenile adjudications.

2. 18 USC § 5038 (2012).

Where you or your advocate are able to obtain juvenile records, they will be helpful. However, you should be mindful of the important confidentiality laws that apply to this information. Records may be kept with the police, probation department, or office where the incident occurred, with the public or private defender involved in the youth's case, with juvenile court, or with the district or state attorney.

TIP:

You can find more information about confidentiality laws related to juvenile cases from a number of sources, including the Immigration Legal Resource Center's *DACA: The Essential Legal Guide*.³ This guide will also help practitioners determine whether a client should apply, how to approach the disclosure of sealed juvenile records, how to properly disclose juvenile adjudications to DHS in the DACA application, and how to defend against improper sharing of confidential juvenile information between law enforcement and DHS.

FBI records

DHS will obtain FBI records for each DACA applicant, so these records are important to obtain if you have ever been convicted or arrested.

TIP:

FBI records may be incomplete for a number of reasons, such as a failure to disclose arrests or convictions by a reporting entity. For this reason, it is important that while you obtain your FBI record, you also get records from other sources, such as from the state or the court where you were arrested or convicted.

To obtain a copy of your FBI record, make a request directly to the agency (and not use an FBI-approved channeler). Attorneys seeking FBI records for a client should submit a cover letter with a release from their client to accompany the request. This toolkit contains a fillable request form located at Appendix S or online at:



Link: <https://forms.fbi.gov/identity-history-summary-checks-review/q384893984839334.pdf>

Social security numbers, tax ID numbers, and citizenship information are optional and do not have to be provided to complete an FBI request.

3. Immigrant Legal Resource Center, *DACA: The Essential Legal Guide* 3-23 to -29 (2nd ed. 2014).

TIP:

On the form, under the field asking for the “purpose” or “reason for the request,” you should select or write “personal review” or “review of own record.” **Do not write or disclose that the request is for immigration purposes.** You should then sign and date the form, and mail it to:

FBI CJIS Division – Summary Request
1000 Custer Hollow Road
Clarksburg, West Virginia 26306

The form should be accompanied by a fingerprint card and payment of \$18. You may obtain your fingerprints by going to a law enforcement agency or a private business. If you have any outstanding warrants, there is some risk that you will be arrested if you go directly to a law enforcement office to get your fingerprints. Arrest is less likely if you instead go to a private company to perform fingerprint services. The payment should be in the form of a money order or certified check for \$18, payable to the Treasury of the United States, or as a credit card payment using the FBI credit card form, which can be found as a fillable form at Appendix T, or online at:



Link: <https://www.fbi.gov/about-us/cjis/identity-history-summary-checks/credit-card-payment-form>

A request checklist from the FBI can be found at Appendix U, to help you ensure that you have all the required information. It can also be found online at:



Link:
<https://www.fbi.gov/about-us/cjis/identity-history-summary-checks/identity-history-summary-request-checklist-1>

If the FBI finds no criminal history in your file, you will receive a response indicating “no prior arrest data available.” If there are any criminal history records, the individual will receive his or her Identity History Summary or “rap sheet.”

State Criminal Records

You will also want to gather state criminal records, as they may have more complete information than an FBI record. State records will contain all the arrests, convictions, and adjudications that occurred in the requested state target. When you have been arrested in more than one state, requests should be made to each state individually. These records will not reveal any criminal records that occurred outside of the state or any federal or immigration proceedings.

You or your advocate should contact the relevant agency for specific instructions on how to prepare a request for state criminal records. You may be required to submit fingerprints as part of the process. As with FBI requests, you should not try to obtain fingerprints or criminal records at a law enforcement agency if you have outstanding warrants, as you risk being arrested. Instead you should seek out an approved private business to complete fingerprinting.

For example, in New York, the Division of Criminal Justice Services (DCJS) is charged with collecting and distributing all rap sheets in the state (Identity History Summary). For individuals living in the state and not incarcerated or for those who will be incarcerated for less than 45 days, you may request your rap sheet directly from DCJS. The fee to obtain a rap sheet is \$60.75, to be paid at the time of your request. Specific information can be found at:



Link: <http://www.criminaljustice.ny.gov/ojis/recordreview.htm>

In New York, if you have an outstanding warrant, even contacting DCJS to obtain a rap sheet may put you at risk for arrest, as it will provide a current address to the arresting agency. In this case, you may want to consider working with a practitioner to determine the best path forward.

Record from the court where arrested/convicted

Getting court records can help you or your advocate create a more complete picture of your criminal history. Court records will have the greatest amount of detail relating to the circumstances of your case and the outcome. This information will help authorities determine whether or not to grant you DACA.

You or your attorney should first search to see if the court records are available online in the county where your court case took place. It is possible that a request for records may require you to file a form online, through mail, or in-person. You can learn the proper procedure for the county by contacting the court clerk's office.

Records may be destroyed after a certain period of time, depending on the county. If this is the case, you may want to obtain a letter from the court, stating that records were destroyed following established policy.

note

18. Other Records

Appendix V:

Model Letter: Blank Template (Other Records)

Institutions and government agencies have many record request policies. While this toolkit provides model letters and forms that you would most likely need, it does not contain every single possible model letter or form. This is especially true for local agencies or smaller institutions that might not have formal policies for maintaining and releasing records.

In many cases, you will be able to obtain records by sending an institution a written letter. In order to make this easier, this toolkit provides a blank letter template that you can complete and send to an institution to request your records or ask about their record retention and release policy. You may use the blank template letter located at Appendix V to write record requests to entities that this toolkit does not reference.

19. Appendices

• Appendix A: Model Affidavit (Physical Presence Records)	60
• Appendix B: Appendix B: Form: Annual Credit Report Request Form (Credit Records)	62
• Appendix C: Model Letter: FERPA Request (School Records)	64
• Appendix D: Model Letter: Demonstrated Effectiveness of Educational Program (School Records)	66
• Appendix E: Model Letter: Verification of 501(c)(3) Status Request (School Records)	69
• Appendix F: Model Letter: Employment Verification (Employment Records)	71
• Appendix G: Model Letter: Health Insurance Portability and Accountability Act (HIPPA) Request (Medical Records)	73
• Appendix H: State Birth Certificate Request Procedure (Vital Records)	75
• Appendix I: State Marriage Certificate Request Procedure (Vital Records)	102
• Appendix J: Model Letter: State FOIA Request (State Agency Records)	131
• Appendix K: Chart on How to Request State Tax Returns (State Tax Records)	133
• Appendix L: Model Letter: Federal FOIA Request (Federal Agency Records)	138
• Appendix M: Military Records Request SF-180 Form (Military Records)	140
• Appendix N: Application for Search of Census Records BC-600 Form (Census Records)	144
• Appendix O: DHS Freedom of Information/Privacy Act Request G-639 Form & Instructions (Immigration Records)	153
• Appendix P: ICE Affirmation/Declaration Form (Immigration Records)	165
• Appendix Q: IRS Request for Transcript of Tax Return 4506-T Form (Federal Tax Records)	167
• Appendix R: Model Letter: Selective Service System Verification of Registration Letter (Military Records)	171
• Appendix S: FBI Applicant Information I-783 Form (Criminal Records)	173
• Appendix T: FBI Credit Card Payment I-786 Form (Criminal Records)	175
• Appendix U: FBI Identity History Summary Request Checklist (Criminal Records)	177
• Appendix V: Model Letter: Blank Template (Other Records)	179

Appendix A: Model Affidavit (Physical Presence Records)

For the latest version of this model affidavit, please visit: <http://www.maldef.org>

AFFIDAVIT OF _____
Full Legal Name

Re: Affidavit for _____
Name of Requestor

1. My name is _____.
Full Legal Name

My telephone number is _____.
Telephone Number

My address is _____.
Address

2. I personally know _____ because:
Name of Requestor

How You Know the Requestor

3. I know _____ was present in the United States at the following times:
Name of Requestor

a. _____ because:
Date or Date Range

Basis of Knowledge

b. _____ because:
Date or Date Range

Basis of Knowledge

c. _____ because:
Date or Date Range

Basis of Knowledge

4. I have the following additional comments:

Additional Comments

I declare under penalty of perjury that the contents of this statement are true and correct to the best of my knowledge and belief.

Signature

Date

Printed full Legal Name

Appendix B: Form: Annual Credit Report Request Form (Credit Records)
For the latest version of this form, please visit: <http://www.maldef.org>



G-1

Appendix C: Model Letter: FERPA Request (School Records)
For the latest version of this model letter, please visit: <http://www.maldef.org>

Date

Full Legal Name

Address Line 1

Address Line 2

Phone Number

Email Address (if available)

Recipient's Name and Title and/or Department

Educational Institution

Address Line 1

Address Line 2

Other Contact Information (Phone, Email, Fax, etc.)

Re: FERPA Request for School Records

Dear _____ :
Recipient's Name

My name is _____ and I am a _____ student.
Full Legal Name Current/former/parent of a current/parent of a former

The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. §§ 1232g(a)(1)(A), provides a student and parents access to a student's own educational records. This letter is my official request for access to these education records, including permanent record cards, report cards, transcripts, diplomas, and all other educational records held by your institution for the student named below:

Full Legal Name of Student (Include maiden or double surname if applicable)

Student's Dates of Attendance (List approximate dates or grades if exact period is unknown)

Student's Date of Birth (MM-DD-YYYY format)

Unique Identifier Used by Educational Institution (if applicable)

To authenticate my identity, attached to this letter is a copy of my: _____.
Driver's License/Other Form of Identification (Such as a valid passport)

- ☐ My current residence is a great distance from your educational institution, and I am unable to review these records in person. Therefore, under FERPA, I request that copies of the student's educational records be mailed to the above address; or
- ☐ My current residence is **not** a great distance, and I respectfully request a copy of my educational records be mailed to the above address or provided to me. If you cannot mail a copy of my educational records, please contact me to arrange an in-person visit where I can inspect and view the educational records.

If possible, I would like the school registrar to stamp or otherwise certify the copies shared. I understand that you may charge a fee to make copies; if so, please contact me so that I can arrange to request a fee reduction. I look forward to obtaining access to the above records within 45 days, as specified under the regulations governing FERPA, 34 CFR § 99.10(b). If my request cannot be honored within 45 days, please inform me of this by letter including the date that I might expect to receive my records. If you are unable to provide the documents specified in this request, please inform me by letter of the reason and provide a copy of your record retention policy.

Additional Comments

You can email this information to me at the above email or mail hard copies to the above address. Please let me know if you have any questions. Thank you for your assistance.

Sincerely,

Signature

Printed Full Legal Name

For the latest version of this model letter, please visit: <http://www.maldef.org>

Date

Full Legal Name

Address Line 1

Address Line 2

Phone Number

Email Address (if available)

Recipient's Name and Title and/or Department

Educational Institution

Address Line 1

Address Line 2

Other Contact Information (Phone, Email, Fax, etc.)

Re: Demonstrated Effectiveness and/or Non-Profit Verification

I am an authorized representative for: _____ and write to: (a) identify the category of educational program that _____ is currently enrolled in; and (b) identify the program's source of public funding (municipal, county, state, or federal); or (c) provide evidence that the program is of demonstrated effectiveness.

Part 1. Type of Program.

This program qualifies as an:

- ☐ Education Program
- ☐ Literacy Program
- ☐ Career Training Program (Including Vocational Training)
- ☐ Other _____

This program is designed to (check all that apply):

- ☐ Lead to Placement in Postsecondary Education;
- ☐ Lead to Placement in Job Training;
- ☐ Lead to Placement in Employment;
- ☐ Improve Literacy;
- ☐ Improve Mathematics
- ☐ Improve English;
- ☐ Assist Students to Obtain a High School Diploma;
- ☐ Assist Students to Obtain a Recognized High School Diploma Equivalent under State Law (including certificate of completion, certificate of attendance, or alternate award);
- ☐ Assist Students to Pass a GED EXAM or Other State-Authorized Exam (e.g., HiSet or TASC); pr
- ☐ Other _____

Part 2. Source of Funding.

I write to confirm that educational institution/program I represent is (check one):

- ☐ Funded by Municipal, County, State, or Federal Funds (Complete Part 2(a)); or
- ☐ Administered by a Non-Profit Organization (Complete Part 2(b)); or
- ☐ Of "Demonstrated Effectiveness" (Complete Part 2(c)).

Part 2(a). Public Funding.

To verify that this educational institution/program is funded by municipal, state, or federal funds, I affirm the following:

State Source of Public Funding for Program (Municipal, State, or Federal)

Part 2(b). Non-Profit Organization.

To verify that this educational institution/program is a non-profit program, I provide the following (check all that apply):

- ☐ Institution's IRS Affirmation Letter
- ☐ Institution's IRS Determination Letter
- ☐ Other _____

The Internal Revenue Service (IRS) initially issues a 501(c)(3) Determination Letter to verify that an organization is a non-profit organization and exempt from federal income tax. The IRS may also subsequently issue an Affirmation Letter which serves to confirm organization's 501(c)(3) status. If your organization is a 501(c)(3) organization but does not have access to either a Determination or Affirmation Letter, your organization may request an Affirmation Letter from the IRS. The request must include: (a) your organization's full name; (b) your organization's Employer Identification Number; and (c) authorized signature of officer or trustee. Per IRS guidelines, "the individual signing the letter must state the capacity in which he or she is signing (for example, 'John Smith, President')." For more information regarding 501(c)(3) status, instructions to request Affirmation and Determination Letters, and latest versions of applicable forms, please visit: <http://www.irs.gov/Charities-&-Non-Profits/>

Part 2(c). Demonstrated Effectiveness.

To verify that this educational institution/program is of demonstrated effectiveness, I provide the following information (complete as many fields as possible):

The program has existed since _____ .
Date of Program's Creation

The program assists students in obtaining a GED, post-secondary education, or employment by:

Program's Track Record in Assisting Students in Obtaining GED, Post-secondary Education, or Employment (REQUIRED)

The program received the following awards, special achievement, or recognition that indicates the program's overall quality:

Program's Track Record in Assisting Students in Obtaining GED, Post-secondary Education, or Employment (OPTIONAL)

I provide the following additional information regarding the program's overall quality:

Any Other Information Regarding the Program's Overall Quality (OPTIONAL)

Please feel free to contact me at the above contact information if you have any questions. Thank you for your assistance.

Sincerely,

Signature of Authorized Representative

Printed Full Legal Name

Appendix E: Model Letter: 501(c)(3) Request (Educational Records)
For the latest version of this model letter, please visit: <http://www.maldef.org>

Date

Full Legal Name

Address Line 1

Address Line 2

Phone Number

Email Address (if available)

Recipient's Name and Title and/or Department

Educational Institution

Address Line 1

Address Line 2

Other Contact Information (Phone, Email, Fax, etc.)

Re: Request for 501(c)(3) Determination or Affirmation Letter

My name is: _____ and I am currently enrolled at your educational institution.
Full Legal Name

The purpose of this letter is to request a copy of your organization's 501(c)(3) Determination or Affirmation Letter, also commonly known as a 501(c)(3) certificate. The Internal Revenue Service (IRS) initially issues a 501(c)(3) Determination Letter to verify that an organization is a non-profit organization and exempt from federal income tax. The IRS may also subsequently issue an Affirmation Letter which serves to confirm organization's 501(c)(3) status. For the purposes of this request, you may provide a copy of either the Determination or Affirmation Letter. **Please mail or email a copy of either letter to the above physical or email address.**

If your organization is a 501(c)(3) organization but does not have access to either a Determination or Affirmation Letter, your organization may request an Affirmation Letter from the IRS. The request must include: (a) your organization's full name; (b) your organization's Employer Identification Number; and (c) authorized signature of officer or trustee. Per IRS guidelines, "the individual signing the letter must state the capacity in which he or she is signing (for example, 'John Smith, President')." Your organization should send the letter or fax to:

Internal Revenue Service
Exempt Organizations Determinations
Room 4024
P.O. Box 2508
Cincinnati, OH 45201
Fax: (855) 204-6184

For more information regarding 501(c)(3) status, instructions to request Affirmation and Determination Letters, and latest versions of applicable forms, please visit: <http://www.irs.gov/Charities-&-Non-Profits/>

Additional Comments (Optional)

Please let me know if you have any questions. Thank you for your assistance.

Sincerely,

Signature

Printed Full Legal Name

Appendix F: Model Letter: Employment Verification (Employment Records)
For the latest version of this model affidavit, please visit: <http://www.maldef.org>

Appendix G: Model Letter: HIPPA Request (Medical Records)
For the latest version of this model letter, please visit: <http://www.maldef.org>

Date

Full Legal Name

Address Line 1

Address Line 2

Phone Number

Email Address (if available)

Recipient's Name and Title and/or Department

Medical Facility or Provider

Address Line 1

Address Line 2

Other Contact Information (Phone, Email, Fax, etc.)

Re: HIPPA Request for Medical Records

Dear _____ :
Recipient's Name

The purpose of this letter is to request copies of my medical records as allowed by the Health Insurance Portability and Accountability Act (HIPAA), Pub. L. 104–191 (1996), and Department of Health and Human Services regulations, 45 CFR § 164.524.

My identifying information is below:

Full Legal Name (include maiden or double surname if applicable)

Dates of Service (List approximate dates if exact dates are unknown)

Date of Birth (MM-DD-YYYY format)

Social Security Number or Individual Tax Identification Number

To authenticate my identity, attached to this letter is a copy of my: _____.
Driver's License/Other Form of Identification (such as a valid passport)

I request copies of all health records related to my treatment at your facility. I understand that you may charge a reasonable, cost-based fee for copying and mailing the records, but will not charge for time spent locating them, in accordance with 45 CFR § 164.524(c)(4). If a fee is required, please contact me so that I can arrange payment or adjust the scope of my request.

I look forward to receiving the above records within 30 days, the time specified under the regulations governing HIPAA, 45 CFR § 164.524(b)(2). If my request cannot be honored within 30 days, please affirmatively inform me of this by letter that includes the date I might expect to receive my records. If you are unable to provide the documents specified in this request, please inform me by letter of the reason, in accordance with 45 CFR § 164.524(d), and please provide a copy of your record retention policy.

Additional Comments

You can email this information to me at the above email or mail hard copies to the above address. Please let me know if you have any questions. Thank you for your assistance.

Sincerely,

Signature

Printed full Legal Name

Appendix H: Chart: State Birth Certificate Request Procedure (Vital Records)

For the latest version of this chart, please visit: <http://www.maldef.org>

***Please note that provided links and information may have changed since publishing. It is important to verify information where possible.**

State Birth Records Requests

State	Cost of Copy	Link for General Instructions	Mail-in Forms:	Address	In-Person	Link for Online Ordering *Additional fees may apply*
AL	\$15.00	http://adph.org/vitalrecords/Default.asp?id=1559	English: http://adph.org/vitalrecords/assets/HS14.pdf Spanish: http://adph.org/vitalrecords/assets/hs14sp.pdf	Alabama Vital Records P.O. Box 5625 Montgomery, Alabama 36103-5625	Refer to list of county health departments to find the appropriate address for in-person requests: http://adph.org/vitalrecords/assets/referencemap.pdf	https://www.vitalcheck.com/birth-certificates/alabama
AK*	\$30.00	http://dhss.alaska.gov/dph/VitalStats/Pages/birth/default.aspx	English: http://dhss.alaska.gov/dph/VitalStats/Documents/birth/birth_form.pdf	Department of Health and Social Services Bureau of Vital Statistics P.O. Box 110675 Juneau, AK 99811-0675	You may visit one of the following locations: 1) Juneau Bureau of Vital Statistics 5441 Commercial Blvd. P.O. Box 110675 Juneau, Alaska 99801 (907) 465-3391 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays. 2) Anchorage Bureau of Vital Statistics 3601 C Street, Suite 128 Anchorage, Alaska 99503 (907) 269-0991	https://www.vitalcheck.com/birth-certificates/alaska

					Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.	
AS*	\$5.00	http://www.cdc.gov/nc/hs/w2w/american_samoa.htm	N/A	American Samoa Government Department of Homeland Security Office of Vital Statistics P.O. Box 6894 Pago Pago, AS 96799	American Samoa Government Governor's Office Registrar of Vital Records Office Pago Pago, AS 96799 (684)633-1406 (877) 316-3902	N/A
AR*	\$12.00	http://www.healthy.arkansas.gov/programs/services/certificatesvitalrecords/pages/birthrecords.aspx	http://www.healthy.arkansas.gov/programs/services/certificatesVitalRecords/Documents/vr-7_birth_certificate_application.pdf	Arkansas Vital Records Department of Health 4815 W. Markham Street. Slot 44 Little Rock, AR 72205	Arkansas Vital Records 4815 W. Markham Street Little Rock, AR 72205 (501) 661-2336 Office Hours: Monday—Friday 8:00 a.m. to 4:30pm Closed holidays.	https://www.vitalcheck.com/birth-certificates/arkansas
AZ*	\$15-20 May vary by county: http://www.azdhs.gov/licensing/vital-records/index.php#birth-certificates-who-can-obtain	http://www.azdhs.gov/licensing/vital-records/index.php#birth-certificates-who-can-obtain	English: http://www.azdhs.gov/documents/licensing/vital-records/application-certificate-birth.pdf Spanish: http://www.azdhs.gov/documents/licensing/vital-records/application-certificate-birth-spanish.pdf	State Office of Vital Records P.O. Box 6018 Phoenix, AZ 85005 Mail-in requests can also be mailed to your local county office, in most cases. A list can be found here: http://www.azdhs.gov/documents/licensing/vital-records/office-locations.pdf	The Arizona State Office of Vital Records does not provide in-person service. In-person requests can be completed at local county vital records offices. A list can be found here: http://www.azdhs.gov/documents/licensing/vital-records/office-locations.pdf	https://www.vitalcheck.com/birth-certificates/arizona

				locations.pdf		
CA	\$25.00	http://www.cdph.ca.gov/certlic/birthdeathmar/Pages/CertifiedCopiesofBirthDeathRecords.aspx See also: http://www.cdph.ca.gov/certlic/birthdeathmar/Documents/Birth-2015.pdf Note: For identification purposes, you will need an authorized copy, versus an informational copy. You will need to complete a notarized sworn statement as part of the application.	http://www.cdph.ca.gov/pubsforms/forms/ctrlforms/vs111.pdf	CA Department of Public Health Vital Records - MS-5103 P.O. Box 997410 Sacramento, CA 95899-7410	California Department of Public Health does not provide in-person service. Refer to list of county registrars and recorders to find the appropriate address for in-person requests: http://www.cdph.ca.gov/certlic/birthdeathmar/Pages/CountyRecorderOffice.aspx	https://www.vitalcheck.com/birth-certificates/california
CO*	\$17.75	https://www.colorado.gov/pacific/cdphe/order-birth-certificate	English: https://www.colorado.gov/pacific/sites/default/files/CHED_VR_BirthCertApplication_1115.pdf Spanish: https://www.colorado.gov/pacific/sites/default/files/CHED_VR_BirthCertApplicationSpanish_1115.pdf	Colorado Department of Public Health & Environment Vital Records Section 4300 Cherry Creek Drive South Denver, CO 80246 (303) 692-2200 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.		https://www.colorado.gov/pacific/cdphe/order-birth-certificate-online

CT*	<p>\$20.00 from town/city</p> <p>\$30.00 from state</p>	http://www.ct.gov/dph/cwp/view.asp?a=3132&q=390652	<p>From the Town/City: http://www.ct.gov/dph/LIB/dph/hisr/vr/vs_39b.pdf</p> <p>From the State: http://www.ct.gov/dph/LIB/dph/hisr/VR/vs_39bst.pdf</p>	<p>For Town Requests: You can find addresses for local vital records offices here: http://www.ct.gov/dph/cwp/view.asp?a=3132&q=388128</p> <p>For State requests: Connecticut Department of Public Health Vital Records Section Customer Services, MS # 11 VRS P.O. Box 340308 Hartford, CT 06134-0308</p>	<p>CT Department of Public Health Vital Records Office 410 Capitol Ave. Hartford, CT 06134-0308 (860) 509-7700</p> <p>Office hours: Monday—Friday 8:15 a.m. to 3:45 p.m. Closed holidays.</p> <p>In-person requests can also be completed at the town vital records office where the birth occurred. A list can be found here: http://www.ct.gov/dph/cwp/view.asp?a=3132&q=388128</p>	https://www.vitalcheek.com/birth-certificates/connecticut
DE*	\$25.00	http://www.dhss.delaware.gov/dhss/dph/ss/vitalstats.html	http://www.dhss.delaware.gov/dhss/dph/ss/files/birth.pdf	<p>Office of Vital Statistics Division of Public Health Jesse S. Cooper Building 417 Federal Street Dover, DE 19901</p>	<p>You may visit one of the following locations:</p> <p>1) University Office Plaza - Chopin Building 258 Chapman Road Newark, DE 19702 (302) 283-7100</p> <p>Office hours: Monday—Friday 8:00 a.m. to 4:15 p.m. Closed holidays.</p> <p>2) Thurman Adams State Service</p>	https://www.vitalcheek.com/birth-certificates/delaware

					Center 546 S. Bedford Street Georgetown, DE 19947 (302) 856-5241 Office hours: Monday—Friday 8:00 a.m. to 4:15 p.m. Closed holidays.	
DC*	\$23.00 + \$6.00 mail processing fee	http://www.doh.dc.gov/service/birth-certificates See also: http://doh.dc.gov/sites/default/files/dc/sites/doh/publication/attachments/Guidelines_for_Obtaining_a_Birth_or%20Death_Certificate%20.pdf	https://www.vitalcheck.com/Fax-Phone/DC_Birth_Application.pdf	Department of Health Vital Records Division ATTN: New Applications Dept. 899 North Capitol St., NE, 1st Floor Washington, DC 20002	Department of Health Vital Records Division 899 North Capitol Street, NE - First Floor Washington, DC 20002 (877) 572-6332 – Option #1 Office hours: Monday—Friday 8:30 a.m. to 3:30 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/district-of-columbia
FL*	\$9.00	http://www.floridahealth.gov/certificates/certificates/birth/	English: http://www.floridahealth.gov/certificates/certificates/documents/dh726-birth-app-7-2016.pdf Spanish: http://www.floridahealth.gov/certificates/certificates/documents/dh726s-birth-app-spanish.pdf	Bureau of Vital Statistics Attn: Vital Records Section P.O. Box 210 Jacksonville, FL 32231-0042	Bureau of Vital Statistics 1217 North Pearl Street Jacksonville, FL 32202 (904) 359-6900 Office hours: Monday—Friday 8:00 a.m. to 4:30 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/florida
GA*	\$25.00	https://dph.georgia.gov	https://dph.georgia.gov	State Vital Records Office	State Vital Records Office	https://www.vitalcheck.com

		v/birth-records	/sites/dph.georgia.gov/files/Birth-Certificate-Request-Form.pdf	2600 Skyland Drive, NE Atlanta, GA 30319	2600 Skyland Drive, NE Atlanta, GA 30319 (404) 679-4702 Office hours: Monday—Friday 8:00 a.m. to 4:30 p.m. Closed holidays. In-person requests can also be completed at the county vital records office where the birth occurred. You can call (404) 679-4702 for a specific county office address or telephone number.	k.com/birth-certificates/georgia or https://services.georgia.gov/gta/ods-sales/rover.do
GU	\$5.00	http://www.dphss.guam.gov/content/office-vital-statistics	Your request must include, if ordering outside Guam: 1) Full legal name; 2) Date of event; 3) Photocopy of ID for verification purposes; 4) Self-addressed stamped envelope for return mail; and 5) Special handling instructions.	123 Chalan Kareta, Mangilao, Guam 96913	123 Chalan Kareta, Mangilao, Guam 96913 (671) 735-7263 Office hours: Monday—Friday 8:00 a.m. to 3:30 p.m. Closed holidays.	N/A
HI*	\$10.50 + \$2.50 administrative fee	http://health.hawaii.gov/vitalrecords/how-to-apply-for-certified-copies-of-vital-records/	http://health.hawaii.gov/vitalrecords/files/2015/06/birth-revised-2015.pdf	State Department of Health Office of Health Status Monitoring Vital Records Section	Health Department Building 1250 Punchbowl Street Room 103 Honolulu, HI 96813 (808) 586-4533	https://www.vitalcheck.com/birth-certificates/hawaii or

				P.O. Box 3378 Honolulu, HI 96801-9984	Office hours: Monday—Friday 7:45 a.m. to 2:30 p.m. Closed holidays.	https://vitrec.ehawaii.gov/vitalrecords/
ID*	\$16.00	http://www.healthandwelfare.idaho.gov/Health/VitalRecordsandHealthStatistics/Birth,Death,Marriage,DivorceCertificates/tabid/82/Default.aspx	http://www.healthandwelfare.idaho.gov/Portals/0/Health/VitalRecords/Idaho-Certificate-Request-Form_English.pdf?ver=2016-07-26-083223-153	Vital Records Unit Bureau of Vital Records and Health Statistics P.O. Box 83720 Boise, ID 83720-0036	Idaho Department of Health and Welfare does not provide in-person service. Bureau of Vital Records & Health Statistics 450 West State Street Boise, ID 83702 (208) 334-5988	https://www.vitalcheck.com/birth-certificates/idaho
IL*	\$10.00	http://www.idph.state.il.us/vitalrecords/births/Pages/default.htm See also: http://www.idph.state.il.us/vitalrecords/births/Pages/order.htm#provide	http://www.idph.state.il.us/vitalrecords/births/Documents/birthfrm.pdf	Illinois Department of Public Health Division of Vital Records 925 East Ridgely Avenue Springfield, Illinois 62702-2737	Illinois Department of Public Health Division of Vital Records 925 East Ridgely Avenue Springfield, Illinois 62702 (217) 782-6554 Office hours: Monday—Friday 10:00 a.m. to 3:00 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/illinois
IN*	\$10.00 (for request from state office) May vary by county.	http://www.in.gov/isd/20444.htm	https://forms.in.gov/Download.aspx?id=5623	Vital Records, Indiana State Department of Health P.O. Box 7125, Indianapolis, IN 46206-7125	Indiana Vital Records does not provide in-person service. In-person requests can be completed at the county vital records office where the birth occurred. A list can be found	https://www.vitalcheck.com/birth-certificates/indiana

					here: http://www.in.gov/isdh/20422.htm	
IA*	\$20.00	https://idph.iowa.gov/health-statistics/vital-records See also: https://idph.iowa.gov/health-statistics/request-record	https://idph.iowa.gov/Portals/1/Files/HealthStatistics/birth_application.pdf Note: Form required to be notarized.	Iowa Department of Public Health Bureau of Health Statistics Lucas State Office Building 321 East 12th Street Des Moines, IA 50319-0075	Iowa Department of Public Health Bureau of Health Statistics Lucas State Office Building, 1st Floor 321 E. 12th Street Des Moines, Iowa 50319-0075 (515) 281-4944 Office hours: Monday—Friday 7:00 a.m. to 4:45 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/iowa
KS*	\$15.00	http://www.kdheks.gov/vital/birth.html	English: http://www.kdheks.gov/vital/download/birth_fillable.pdf Spanish: http://www.kdheks.gov/vital/download/birth_esp.pdf	Office of Vital Statistics Curtis State Office Bldg. 1000 SW Jackson, Ste. 120 Topeka, KS 66612	Curtis State Office Bldg. 1000 SW Jackson, Ste. 120 Topeka, KS 66612 (785) 296-1400 Office Hours: Monday—Friday 9:00 a.m. to 4:00 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/kansas
KY	\$10.00	http://chfs.ky.gov/dph/vital/birthcert.htm	English: http://chfs.ky.gov/NR/rdonlyres/9627347C-B7B4-4ED4-AE87-8D02822D84FC/0/VS37Rev012012.pdf Spanish: http://chfs.ky.gov/NR/rdonlyres/9627347C-B7B4-4ED4-AE87-8D02822D84FC/0/VS37Rev012012.pdf	Office of Vital Statistics 275 E. Main St. 1E-A Frankfort, KY 40621	Office of Vital Statistics 275 E. Main St. 1E-A Frankfort, KY 40621 (502) 564-4212 Office hours: Monday—Friday	https://www.vitalcheck.com/birth-certificates/kentucky

			gov/NR/rdonlyres/B9C6DA36-A0AE-49C7-9474-4A77EDF7C1EC/0/BIRTHAPPSPNVS3701302012.pdf		8:00 a.m. to 4:30 p.m. Closed holidays.	
LA*	\$15.00	http://new.dhh.louisiana.gov/index.cfm/page/635	http://new.dhh.louisiana.gov/assets/oph/Centers-RS/vitalrec/Birth_DeathOrderingPacket.pdf	Vital Records Registry P.O. Box 60630 New Orleans, LA 70160	<p>Vital Records Central Office 1450 Poydras Street, Ste. 400 New Orleans, LA 70112 (504) 593-5100</p> <p>Office hours: Monday—Friday 8:15 a.m. to 3:30 p.m. Closed holidays.</p> <p>In-person requests can also be completed at the vital records kiosks. A list can be found here: http://new.dhh.louisiana.gov/index.cfm/directory/category/278.</p> <p>They can also be completed at any participating clerks' offices, for an additional fee. A list can be found here: http://new.dhh.louisiana.gov/index.cfm/directory/category/279</p>	https://www.vitalcheck.com/birth-certificates/louisiana
ME*	\$15.00	http://www.maine.gov/dhhs/mecdc/public-health-systems/data-research/vital-records/order/birth1.html	http://www.maine.gov/dhhs/mecdc/public-health-systems/data-research/vital-records/documents/pdf-files/vrform2.pdf	Vital Records 11 State House Station 220 Capitol Street Augusta, ME 04333-0011	<p>Vital Records 220 Capitol Street Augusta, ME 04333-0011 (207) 287-3181</p> <p>Office hours:</p>	https://www.vitalcheck.com/birth-certificates/maine

					Monday—Friday 9:00 a.m. to 4:00 p.m. Closed holidays.	
MD*	\$10.00	http://dhmh.maryland.gov/vsa/Pages/birth.aspx	<p>English: http://dhmh.maryland.gov/vsa/Documents/birthcertappl07_01_2016.pdf</p> <p>Spanish: http://dhmh.maryland.gov/vsa/Documents/BCSpanish-revised7_01_2016.pdf</p>	Division of Vital Records Department of Health and Mental Hygiene 6550 Reisterstown Road P.O. Box 68760 Baltimore, MD 21215-0036	<p>Division of Vital Records 6764-B Reisterstown Road Baltimore, Maryland 21215 (410) 764-3038</p> <p>Office hours: Monday—Friday 8:00 a.m. to 4:00 p.m. Closed holidays.</p> <p>In-person requests can also be completed at local health department offices (except Montgomery County, Baltimore City, and Baltimore County). You can call (410) 764-3038 or (800) 832-3277 for more information.</p>	https://www.vitalcheck.com/vital-records/maryland/maryland-vital-records
MA*	<p>\$20.00 (in-person)/ \$32.00 (mail)</p> <p>Other fees may vary.</p>	http://www.mass.gov/eohhs/gov/departments/dph/programs/admin/dmoa/vitals/obtaining-certified-copies-of-vital-records.html	http://www.mass.gov/eohhs/docs/dph/vital-records/mail-order-form.pdf	Registry of Vital Records and Statistics 150 Mount Vernon Street 1 st Floor Dorchester, MA 02125-3105	<p>Registry of Vital Records and Statistics 150 Mount Vernon Street, 1st Floor Dorchester, MA 02125-3105 (617) 740-2600</p> <p>Office hours: Monday—Friday 8:45 a.m. to 4:45 p.m. Closed holidays.</p>	https://www.vitalcheck.com/birth-certificates/massachusetts
MI*	\$34.00	http://www.michigan.gov/mdhhs/0,5885,7-	http://www.michigan.gov/documents/birthapp	Vital Records Request P.O. Box 30721	Vital Records Office South Grand Building, 1 st Floor	https://www.vitalcheck.com/birth-

		339-71551_4645---.00.html	6360_7.PDF	Lansing, MI 48909	333 S. Grand Avenue Lansing, MI 48933 (517) 335-8656 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.	certificates/michigan
MN*	\$26.00	http://www.health.state.mn.us/divs/chs/osr/birth.html	http://www.health.state.mn.us/divs/chs/osr/bcappia.pdf Note: Signature on form must be notarized.	Submit by E-mail: Health.issuance@state.mn.us Mail-in: Minnesota Department of Health Central Cashiering – Vital Records P.O. Box 64499 St. Paul, MN 55164-0499	Minnesota Department of Health does not provide in-person service. Refer to list of county registrars to find the appropriate address for in-person requests: http://www.health.state.mn.us/divs/chs/osr/registrar.html	https://www.vitalcheck.com/birth-certificates/minnesota
MS*	\$15.00	http://www.msdsite.state.ms.us/msdhsite/stat/c/31,0,109.html	http://msdh.ms.gov/forms/Form%20522E_201407.pdf	Mississippi Vital Records P.O. Box 1700 Jackson, MS 39215-1700	Mississippi Vital Records Ridgeland Office 222 Marketridge Dr. Ridgeland, MS 39157 (601) 206-8200 Office hours: Monday—Friday 8:00 a.m. to 4:30 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/mississippi
MO	\$15.00	http://health.mo.gov/data/vitalrecords/applications.php#fees	http://health.mo.gov/data/vitalrecords/pdf/birthdeath.pdf	Bureau of Vital Records P.O. Box 570 Jefferson City, MO 65102-0570	Vital Records 930 Wildwood Dr. Jefferson City, MO 65109 (573) 751-6387	https://www.vitalcheck.com/birth-certificates/missouri

			Note: Mail-in requests must be notarized.		Office hours: Monday—Friday 8:30 a.m. to 4:30 p.m. Closed holidays. In-person requests can also be completed at the local health department where the birth occurred. A list can be found here: http://health.mo.gov/living/lpha/lphas.php	
MT*	\$12.00	http://dphhs.mt.gov/vitalrecords.aspx	http://dphhs.mt.gov/Portals/85/Statistics/documents/VitalStats/BirthApplication.pdf	Office of Vital Statistics MT Dept. of Public Health and Human Services 111 N Sanders, Rm. 6 P.O. Box 4210 Helena, MT 59604	Montana Vital Records does not provide in-person service. Office of Vital Statistics MT Dept. of Public Health and Human Services 111 N Sanders, Rm. 6 P.O. Box 4210 Helena, MT 59604 (406) 444-2685	https://www.vitalcheck.com/birth-certificates/montana
NE*	\$17.00	http://dhhs.ne.gov/publichealth/pages/ced_birthcert.aspx	http://dhhs.ne.gov/publichealth/Documents/birth.pdf	Nebraska Vital Records P.O. Box 95065 Lincoln, NE 68509-5065	Vital Records 1033 O Street, Suite 130 Lincoln, NE 68508-3621 (402) 471-2871 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/nebraska
NV*	\$20.00	http://dphh.nv.gov/Pro	http://dphh.nv.gov/uplo	Office of Vital Records	You may visit one of the following	https://www.vitalcheck.com/birth-certificates/nebraska

		grams/BirthDeath/Birth and Death Vital Records - Home/	adedFiles/dpbhnavgov/content/Programs/BirthDeath/Docs/Application%20-%20Birth%20Certificate.pdf	4150 Technology Way, Suite 104 Carson City, NV 89706	<p>locations:</p> <p>1) Office of Vital Records 4150 Technology Way, Suite 104 Carson City, NV 89706 (775) 684-4242</p> <p>Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.</p> <p>2) Southern Nevada Health District 280 S. Decatur Blvd. Law Vegas, NV 89107 (702) 759-1010</p> <p>Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.</p> <p>3) Washoe County Health District 1001 E. Ninth Street Building B, First Floor Reno, NV 89512 (775) 328-2456</p> <p>Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m.</p>	k.com/birth-certificates/nevada
--	--	--	---	--	--	---

					Closed holidays.	
NH*	\$15.00	http://sos.nh.gov/certcopies.aspx	http://sos.nh.gov/WorkArea/DownloadAsset.aspx?id=8589947874	NH Department of State Division of Vital Records Administration Registration/Certification 71 South Fruit Street Concord, NH 03301-2410	Division of Vital Records Administration Registration/Certification 71 South Fruit Street Concord, NH 03301-2410 (603) 271-4650 Office hours: Monday—Friday 8:30 a.m. to 3:30 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/new-hampshire
NJ*	\$25.00 Fees may vary by county.	http://www.nj.gov/health/vital/order-vital/non-genealogical-records/	English instructions: http://www.state.nj.us/health/forms/reg-27_instr1.pdf Spanish: http://www.state.nj.us/health/forms/reg-27.pdf	For Town Requests: You can find addresses for local vital records offices here: http://www.state.nj.us/health/vital/order-vital/local-vital-records/index.shtml For State Requests: New Jersey Office of Vital Statistics and Registration Customer Service Unit – Non-genealogical Requests P.O. Box 370 Trenton, NJ 08625-0370	New Jersey Department of Health Office of Vital Statistics and Registry 140 E Front St. Trenton, NJ 08625 (609) 292-4087 x582 Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m. Closed holidays. In-person requests can also be completed at the Local Vital Records Office in the county where the birth occurred. A list can be found here: http://www.state.nj.us/health/vital/order-vital/local-vital-records/	https://www.vitalcheck.com/birth-certificates/new-jersey
NM*	\$10.00	http://nmhealth.org/about/erd/bvrhs/vrp/birth	English: http://nmhealth.org/publication/view/fo	New Mexico Vital Records P.O. Box 25767	You may visit one of the following locations:	https://www.vitalcheck.com/birth-

		th/	rm/607/ Spanish: http://nmhealth.org/publication/view/form/608/	Albuquerque, NM 87125	<p>1) Bureau of Vital Records & Health Statistics 1105 S. St. Francis Drive Santa Fe, NM 87505 (505) 827-0121</p> <p>Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m. Closed holidays.</p> <p>2) Midtown Public Health Office 22400 Wellesly Dr. NE Albuquerque, NM 87101 (505) 841-4100</p> <p>Office hours: Monday—Friday 9:00 a.m. to 11:50 a.m. & 1:00 a.m. to 3:30 p.m. Closed holidays.</p>	certificates/new-mexico
NY*	<p>Births outside of NYC: \$30.00</p> <p>Births in NYC: \$15.00 + \$2.75 identification fee</p>	<p>For births outside of New York City: https://www.health.ny.gov/vital_records/birth.htm</p> <p>For births in New York City: http://www1.nyc.gov/site/doh/services/birth-certificates.page</p>	<p>For births outside of New York City: https://www.health.ny.gov/forms/doh-4380.pdf</p> <p>For births in New York City: http://www1.nyc.gov/assets/doh/downloads/pdf/vr/birth1.pdf</p>	<p>For births outside of New York City: New York State Department of Health Vital Records Certification Unit P.O. Box 2602 Albany, NY 12220-2602</p> <p>For births in New York City:</p>	<p>In-person requests are available only for births in New York City:</p> <p>NYC Department of Health & Mental Hygiene 125 Worth St., Room 144 New York, NY 10013 (347) 396-7962</p> <p>Office hours: Monday—Friday</p>	https://www.vitalcheck.com/birth-certificates/new-york

		Spanish: http://www1.nyc.gov/assets/doh/downloads/pdf/vr/order-birth-certificate-sp.pdf		NYC Department of Health and Mental Hygiene Office of Vital Records 125 Worth St., CN-4 New York, NY 10013	9:00 a.m. to 3:30 p.m. Closed holidays.	
NC*	\$24.00	http://vitalrecords.nc.gov/order.htm	http://vitalrecords.nc.gov/documents/ApplicantBirthCert GN fill-in 20150504.pdf	NC Vital Records 1903 Mail Service Center Raleigh, NC 27699-1903	NC Vital Records Cooper Memorial Health Building 225 N. McDowell St. Raleigh, NC 27603-1382 (919) 733-3000 Office hours: Monday—Friday 8:00 a.m. to 3:00 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/north-carolina
ND*	\$7.00	https://www.ndhealth.gov/vital/birth.htm	https://www.ndhealth.gov/vital/forms/birth.pdf	Division of Vital Records 600 E. Boulevard Ave. - Dept. 301 Bismarck, ND 58505-0200	State Capitol Building Judicial Wing, Room 118 Bismarck, ND 58501 (701) 328-2360 Office hours: Monday—Friday 7:30 a.m. to 5:00 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/north-dakota
OH	\$21.50 Fees may vary by county.	https://www.odh.ohio.gov/vs	https://www.odh.ohio.gov/~media/ODH/ASSETS/Files/vs/general/applicationform.pdf	Ohio Department of Health Vital Statistics P.O. Box 15098 Columbus, Ohio 43215-0098	Ohio Department of Health 246 N. High St. Columbus, OH 43215 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/ohio

					<p>In-person requests can also be completed at any city or county vital records office. A list can be found here:</p> <p>https://www.odh.ohio.gov/~media/ODH/ASSETS/Files/vs/Directory%20of%20Ohio%20Health%20Departments%20with%20Vital%20Statistics%20offices.pdf</p>	
OK*	\$15.00	http://www.ok.gov/health/Birth_and_Death_Certificates/Birth_Certificates/	http://www.ok.gov/health2/documents/VR_BCR_request_interactive.pdf	<p>Vital Records Service Oklahoma State Department of Health P.O. Box 53551 Oklahoma City, OK 73152</p>	<p>You may visit one of the following locations:</p> <ol style="list-style-type: none"> 1) Oklahoma State Department of Health 1000 Northeast 10th Oklahoma City, OK 73117 (405) 271-5600 <p>Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m. Closed holidays.</p> <ol style="list-style-type: none"> 2) James O. Goodwin Health Center 5051 S. 129th East Ave. Tulsa, OK 74134 (918) 594-4840 <p>Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m.</p>	https://www.vitalcheck.com/birth-certificates/oklahoma

					<p>Closed holidays.</p> <p>3) Pittsburg County Health Department 1400 East College Ave. McAlester, OK 74501 (918) 423-1267</p> <p>Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m. Closed holidays.</p>	
OR*	<p>\$25.00 – \$49.95</p> <p>Fees vary.</p>	https://public.health.oregon.gov/BirthDeathCertificates/Pages/index.aspx	<p>English: https://public.health.oregon.gov/BirthDeathCertificates/GetVitalRecords/Documents/birthor.pdf</p> <p>Spanish: https://public.health.oregon.gov/BirthDeathCertificates/GetVitalRecords/Documents/4513s.pdf</p>	<p>Oregon Vital Records P.O. Box 14050 Portland, OR 97293</p>	<p>Oregon Vital Records 800 NE Oregon Street, Suite 205 Portland, OR 97232 (971) 673-0372</p> <p>Office hours: Monday—Friday 9:00 a.m. to 4:00 p.m. Closed holidays.</p>	https://www.vitalcheck.com/birth-certificates/oregon
PA*	\$20.00	http://www.health.pa.gov/MyRecords/Certificates/BirthCertificates/Pages/default.aspx#.VL4swHarSUK	http://www.health.pa.gov/MyRecords/Certificates/BirthCertificates/Documents/Birth_Certificate_Application%20(Web)%20Rev%205-2015.pdf	<p>Division of Vital Records ATTN: Birth Unit P.O. BOX 1528 New Castle, PA 16103</p>	<p>You may visit one of the following locations:</p> <p>1) Erie Public Office Division of Vital Records 1910 West 26th St. Erie, PA 16508-1148 (814) 871-4261</p>	https://www.vitalcheck.com/birth-certificates/pennsylvania

					<p>Office hours: Monday—Friday 8:00 a.m. to 4:00 p.m. Closed holidays.</p> <p>2) Harrisburg Public Office Division of Vital Records Forum Place 555 Walnut St., First Floor Harrisburg, PA 17101-1914 (717) 772-3480</p> <p>Office hours: Monday—Friday 8:00 a.m. to 4:00 p.m. Closed holidays.</p> <p>3) New Castle Public Office Division of Vital Records Room 401 Central Building 101 South Mercer St. New Castle, PA 16101 (724) 656-3100</p> <p>Office hours: Monday—Friday 8:00 a.m. to 4:00 p.m. Closed holidays.</p> <p>4) Pittsburgh Public Office Division of Vital Records 411 Seventh Ave., Suite 360 Pittsburgh, PA 15219-1973</p>	
--	--	--	--	--	---	--

					<p>(412) 565-5113</p> <p>Office hours: Monday—Friday 8:00 a.m. to 4:00 p.m. Closed holidays.</p> <p>5) Scranton Public Office Division of Vital Records Room 112, Scranton State Office Building 100 Lackawanna Ave. Scranton, PA 18503-1928 (570) 963-4595</p> <p>Office hours: Monday—Friday 8:00 a.m. to 4:00 p.m. Closed holidays.</p> <p>6) Philadelphia Public Office Division of Vital Records 110 N. Eighth St.; Suite 108 Philadelphia, PA 19107-2412 (215) 560-3054</p> <p>Office hours: Monday—Friday 8:00 a.m. to 3:00 p.m. Closed holidays.</p>	
PR	\$7.00	Spanish: https://serviciosonlinea.gobierno.pr/Salud/Ser	English: https://serviciosonlinea.gobierno.pr/Salud/Mail-	Department of Health Demographic Registry P.O. Box 11854	Refer to list of local offices to find the appropriate address for in-person requests:	https://www.vitalcheck.com/birth-certificates/puerto-

		vicios.aspx?goto=nacimiento	In%20Application.pdf Spanish: https://serviciosonline.gobierno.pr/Salud/Solicitud%20Nacimiento%20Correo.pdf	Fernandez Juncos Station San Juan, PR 00910	http://www.salud.gov.pr/Servicios-al-Ciudadano/Documents/Directorio%20Oficinas%20Locales%20del%20ORD.pdf (866) 842-6765	rico
RI*	\$20.00	http://www.health.ri.gov/records/howto/getacopy/	http://www.health.ri.gov/forms/recordrequest/Birth.doc	RI Department of Health Office of Vital Records 3 Capitol Hill, Room 101 Providence, RI 02908-5097	Office of Vital Records 3 Capitol Hill, Room 101 Providence, RI 02908 Office hours: Monday—Friday 12:30 p.m. to 4:00 p.m. Closed holidays. In-person requests can also be completed at the city or town clerk office where the birth occurred. A list can be found here: http://health.ri.gov/records/#where	https://www.vitalcheck.com/birth-certificates/rhode-island
SC*	\$12.00	http://www.scdhec.gov/VitalRecords/BirthCertificates/	English: http://www.scdhec.gov/library/d-0640.pdf Spanish: http://www.scdhec.gov/library/d-0640s.pdf	DHEC Vital Records 2600 Bull Street Columbia, SC 29201	DHEC State Vital Records Office 2600 Bull St. Columbia, SC 29201 (803) 898-3630 Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/south-carolina
SD*	\$15.00	http://doh.sd.gov/reco	http://doh.sd.gov/docu	Vital Records	Vital Records	https://www.vitalcheck.com/birth-certificates/south-carolina

		rds/birth-records.aspx?	ments/Records/StateApplication.pdf	<p>South Dakota Department of Health 207 East Missouri Avenue, STE 1-A Pierre, SD 57501</p> <p>You may also mail-in your request to any South Dakota Register of Deeds office, which can be found here: http://doh.sd.gov/records/county/</p>	<p>South Dakota Department of Health 207 East Missouri Avenue, STE 1-A Pierre, SD 57501</p> <p>Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.</p> <p>In-person requests can also be completed at any Register of Deeds clerk office in the city or town where the birth occurred. A list can be found here: http://doh.sd.gov/records/county/</p>	k.com/birth-certificates/south-dakota
TN*	\$15.00	https://tn.gov/health/article/vr-certificate	<p>https://tn.gov/assets/entities/health/attachments/ph-1654.pdf</p> <p>Note: PDF includes Spanish application.</p>	<p>Tennessee Vital Records Andrew Johnson Tower, 1st Floor 710 James Robertson Parkway Nashville, TN 37243 (615) 741-1763 (855) 809-0072</p> <p>Office hours: Monday, Wednesday, and Friday 8:00 a.m. to 4:00 p.m. Tuesday and Thursday 8:00 a.m. to 6:00 p.m. Closed holidays.</p>	<p>Tennessee Vital Records Andrew Johnson Tower, 1st Floor 710 James Robertson Parkway Nashville, TN 37243 (615) 741-1763 (855) 809-0072</p> <p>Office hours: Monday, Wednesday, and Friday 8:00 a.m. to 4:00 p.m. Tuesday and Thursday 8:00 a.m. to 6:00 p.m. Closed holidays.</p>	https://www.vitalcheek.com/birth-certificates/tennessee
TX*	\$22.00	https://www.dshs.state.tx.us/vs/regproc/certified_copy.shtm	https://www.dshs.state.tx.us/vs/regproc/forms/VS-142-3-REV-9-	<p>Texas Vital Records Department of State Health Services</p>	<p>Department of State and Health Services 1100 W. 49th St.</p>	https://www.vitalcheek.com/birth-certificates/texas

		Note: You will need to complete a notarized sworn statement as part of the application.	2015.pdf	P.O. Box 12040 Austin, TX 78711-2040	Austin, TX 78756 (512) 776-7111 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.	or https://txapps.texas.gov/tolapp/ovra/SelectRequestType.htm
UT*	\$20.00	https://vitalrecords.utah.gov/certificates/order-a-vital-record-certificate	https://vitalrecords.utah.gov/wp-content/uploads/Birth-Certificate-Request-Application.pdf	Certification Office of Vital Records P.O. Box 141012 Salt Lake City, UT 84114-1012	Cannon Health Building 288 North 1460 West Salt Lake City, UT 84114 (801) 538-6105 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/utah
VT	\$10.00	For births that occurred more than 5 years ago: http://healthvermont.gov/research/records/birth_form.aspx or https://www.sec.state.vt.us/archives-records/vital-records/certified-copies.aspx	For births that occurred before January 1, 2011, use the following form: https://www.sec.state.vt.us/media/345352/vsara-08_birthsdeaths.pdf For births that occurred after January 1, 2011, use the following link to complete form online and print for mailing: http://healthvermont.gov/research/records/birth_form.aspx	For births that occurred before January 1, 2011, mail the appropriate form to: Vermont State Archives and Records Administration 1078 US RTE 2, Middlesex Montpelier, VT 05633-7701 Note: Must include self-addressed/stamped envelope. For births that	For births that occurred more than 5 years ago: Vermont State Archives and Records Administration 1078 US Route 2, Middlesex Montpelier, VT 05633-7701 For births within the last 5 years: Vermont Department of Health 108 Cherry Street, Suite 303 Burlington, VT 05402 (802) 863-7275 Office hours: Monday—Friday	https://secure.vermont.gov/VSARA/vitalrecords/

				<p>occurred after January 1, 2011, mail to:</p> <p>Vermont Department of Health Vital Records P.O. Box 70 Burlington, VT 05402-007</p>	<p>7:45 a.m. to 4:30 p.m. Closed holidays. Note: record requests must be made by 3:30pm.</p>	
VA*	\$12.00	http://www.vdh.virginia.gov/vital-records/	<p>English: http://www.vdh.virginia.gov/content/uploads/sites/93/2016/07/appform.pdf</p> <p>Spanish: http://www.vdh.virginia.gov/content/uploads/sites/93/2016/07/appform_Spanish.doc</p>	<p>Division of Vital Records P. O. Box 1000 Richmond, Virginia 23218</p>	<p>The Virginia Department of Health Division of Vital Records 2001 Maywill Street Richmond, Virginia 23230</p> <p>Office hours: Monday—Friday 8:00 a.m. to 4:45 p.m. Saturdays 8:00 a.m. to 12:00 p.m. Closed holidays.</p> <p>Note: You may also purchase certified copies of vital records at any full service DMV location.</p>	https://www.vitalcheck.com/birth-certificates/virginia
VI	\$12.00-\$15.00	http://www.cdc.gov/ncw2w/virgin_islands.htm	N/A	<p>1) Saint Croix: Chief Deputy Clerk Family Division Territorial Court of the Virgin Islands P.O. Box 929 Christiansted St. Croix, VI 00820</p> <p>2) Saint Thomas/John:</p>	<p>Bureau of Vital Records and Statistical Services Virgin Islands Department of Health Charlotte Amalie St. Thomas, VI 00801</p>	N/A

				Clerk of the Territorial Court of the Virgin Islands Family Division P.O. Box 70 Charlotte Amalie St. Thomas, VI 00801		
WA	\$20.00-\$31.50	http://www.doh.wa.gov/LicensesPermitsandCertificates/BirthDeathMarriageandDivorce/OrderCertificates	http://www.doh.wa.gov/Portals/1/Documents/Public/422-044-BirthDeathCertificateMailOrderForm.pdf	Department of Health P.O. Box 9709 Olympia WA 98507-9709	101 Israel Road SE Tumwater, WA 98501 (360) 236-4300 Office hours: Monday—Friday 8:00 a.m. to 4:30 p.m. Closed holidays. Note: Same day orders after 4:00 p.m. may be processed next business day.	https://www.vitalcheck.com/birth-certificates/washington
WV*	\$12.00	http://www.wvdhhr.org/bph/hsc/vital/birthcert.asp	http://www.wvdhhr.org/bph/hsc/vital/forms/birthfm.pdf	Vital Registration Room 165 350 Capitol Street Charleston, WV 25301-3701	350 Capitol Street Charleston, WV 25301-3701 (304) 558-2931 Office hours: Monday—Friday 8:30 a.m. to 5:00 p.m. Closed holidays.	https://www.vitalcheck.com/birth-certificates/west-virginia
WI*	\$20.00	https://www.dhs.wisconsin.gov/vitalrecords/birth.htm#brequest	https://www.dhs.wisconsin.gov/forms/f0/f05291.pdf	Wisconsin Vital Records Office P.O. Box 309 Madison, WI 53701-0309	Wisconsin Vital Records Office 1 West Wilson Street Room 160 Madison, WI 608-266-1373	https://www.vitalcheck.com/birth-certificates/wisconsin

					Office hours: Monday—Friday 8:00 a.m. to 4:15 p.m. Closed holidays.	
WY*	\$13.00	https://health.wyo.gov/admin/vitalstatistics/	https://health.wyo.gov/wp-content/uploads/2016/06/WDH_VSS-Birth-Application-Form-1c-2016.pdf	Vital Statistics Services Hathaway Building Cheyenne, WY 82002	Vital Statistics Services First Floor Hathaway Building Cheyenne, WY 82002 (307) 777-7591 Office hours: Monday-Friday, 8:00 a.m. to 4:00 p.m. Closed holidays.	N/A

Appendix I: Chart: State Marriage Certificate Request Procedure (Vital Records)

For the latest version of this chart, please visit: <http://www.maldef.org>

***Please note that provided links and information may have changed since publishing. It is important to verify information where possible.**

State Marriage Records Requests

State	Cost of Copy	Link for General Instructions	Mail-in Forms:	Address	In-Person	Link for Online Ordering *Additional fees may apply*
AL	\$15.00	http://adph.org/vitalrecords/index.asp?id=1562	English: http://adph.org/vitalrecords/assets/HS14.pdf Spanish: http://adph.org/vitalrecords/assets/hs14sp.pdf	Alabama Vital Records P.O. Box 5625 Montgomery, Alabama 36103-5625	Refer to list of county health departments to find the appropriate address for in-person requests: http://adph.org/vitalrecords/assets/referencemap.pdf	https://www.vitalcheck.com/vital-records/alabama/alabama-vital-records
AK*	\$30.00	http://dhss.alaska.gov/dph/VitalStats/Pages/marriage/default.aspx	http://dhss.alaska.gov/dph/VitalStats/Documents/marriage/marriage_form.pdf	Department of Health and Social Services Bureau of Vital Statistics P.O. Box 110675 Juneau, AK 99811-0675	You may visit one of the following locations: 1) Juneau Bureau of Vital Statistics 5441 Commercial Blvd. P.O. Box 110675 Juneau, Alaska 99801 (907) 465-3391 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays. 2) Anchorage Bureau of Vital Statistics 3601 C Street, Suite 128	https://www.vitalcheck.com/marriage-records/alaska

					<p>Anchorage, Alaska 99503 (907) 269-0991</p> <p>Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.</p>	
AS*	\$5.00	http://www.cdc.gov/nchs/w2w/american_samoa.htm	N/A	<p>American Samoa Government Department of Homeland Security Office of Vital Statistics P.O. Box 6894 Pago Pago, AS 96799</p>	<p>American Samoa Government Governor's Office Registrar of Vital Records Office Pago Pago, AS 96799 (684)633-1406 (877) 316-3902</p>	https://www.vitalcheck.com/marriage-records#
AR*	\$10.00	http://www.healthy.arkansas.gov/programsServices/certificatesVitalRecords/Pages/default.aspx	<p>English: http://www.healthy.arkansas.gov/programsServices/certificatesVitalRecords/Documents/vr-9_marriage_app.pdf</p>	<p>Arkansas Vital Records 4815 W. Markham Street, Slot 44 Little Rock, AR 72205</p>	<p>Arkansas Vital Records 4815 W. Markham Street Little Rock, AR 72205</p> <p>Office hours: Monday – Friday 8:00 a.m. to 4:30 p.m. The office is closed on state holidays.</p>	https://www.vitalcheck.com/marriage-records/arkansas
AZ*	May vary by county.	<p>The Arizona Office of Vital Records does not issue marriage records. You must complete your request by mail or in-person at the court clerk offices where the marriage occurred:</p>	N/A	<p>Refer to list of county court offices to find the appropriate address for mail-in requests: http://www.idph.state.il.us/vitalrecords/Pages/countylisting.htm</p>	<p>Refer to list of county court offices to find the appropriate address for in-person requests: http://www.idph.state.il.us/vitalrecords/Pages/countylisting.htm</p>	N/A

		http://www.azcourts.gov/AZ-Courts/AZ-Courts-Locator				
CA	\$15.00	http://www.cdph.ca.gov/certlic/birthdeathmar/Pages/CertifiedCopiesofMarriageandDivorceRecords.aspx The year of the marriage determines from which source you should request the marriage document. Please review the above link for accurate information. For marriage records not held by the California Department of Public Health office, refer to the county registrar or recorder office where the marriage occurred: http://www.cdph.ca.gov/certlic/birthdeathmar/Pages/CertifiedCopiesofMarriageandDivorceRecords.aspx	For available years: English: http://www.cdph.ca.gov/certlic/birthdeathmar/Documents/Marriage-2015.pdf Note: Application includes a Sworn Statement that must be completed. If submitting by mail, statement must be notarized. For years not provided by California Department of Public Health, refer to list of county registers and recorders for mail-in requests: http://adph.org/vitalrecords/assets/reference-map.pdf	For available years: CA Department of Public Health - Vital Records MS: 5103 P.O. Box 997410 Sacramento, CA 95899-7410 For years not provided by California Department of Public Health, refer to list of county registers and recorders for mail-in requests: http://adph.org/vitalrecords/assets/reference-map.pdf	For available years: California Department of Public Health Vital Records - MS 5103 1501 Capitol Avenue Sacramento, CA 95814 (916) 445-2684 Office hours: Monday—Friday 8:00 a.m. to 4:00 p.m. Closed holidays. For years not provided by California Department of Public Health, refer to list of county registers and recorders for in-person requests: http://adph.org/vitalrecords/assets/reference-map.pdf	https://www.vitalcheck.com/marriage-records/california
CO*	\$15.00	https://www.colorado.gov/pacific/cdphe/verification-marriage-civil-union	N/A Note: CO State	Colorado State Archives 1313 Sherman Street Room 120	Colorado State Archives 1313 Sherman Street Room 120	https://www.colorado.gov/pacific/archives/form/marriage-

		dissolution-divorce	Archives strongly discourages mail-in requests. For those unable to visit the office or fill in the online form, it is recommended that you call (303) 866-2550 to make your request over the phone.	Denver, CO	Denver, CO 80203 (303) 866-2550 Office hours: Monday—Friday 10 a.m. to 4:00 p.m. Closed holidays.	record-request or https://www.vitalchek.com/vital-records/colorado/colorado-vital-records-section?click_id=569142836701233154
CT	\$20.00	http://www.ct.gov/dph/cwp/view.asp?a=3132&q=388130&dphNav=1469401	From the Town/City: http://www.ct.gov/dph/LIB/dph/hisr/VR/vs39m.pdf From the State: http://www.ct.gov/dph/LIB/dph/hisr/VR/vs39mst.pdf .	For Town Requests: You can find addresses for local vital records offices here: http://www.ct.gov/dph/cwp/view.asp?a=3132&q=388128 For State Requests: Connecticut Department of Public Health Vital Records Section Customer Services, MS # 11 VRS P.O. Box 340308 Hartford, CT 06134-0308	CT Department of Public Health Vital Records Office 410 Capitol Ave. Hartford, CT 06134-0308 (860) 509-7700 Office hours: Monday—Friday 8:15 a.m. to 3:45 p.m. Closed holidays.	https://www.vitalchek.com/marriage-records/connecticut
DE	\$25.00	http://www.dhss.delaware.gov/dhss/dph/ss/vitals.html	http://www.dhss.delaware.gov/dhss/dph/ss/files/marriage.pdf Note: Delaware has	Office of Vital Statistics Division of Public Health 417 Federal Street Dover, DE 19901	You may visit one of the following locations: 1) Office of Vital Statistics Division of Public Health	https://www.vitalchek.com/marriage-records/delaware

different forms for Civil Unions and Same-Sex Marriages. That form can be found here: http://www.dhss.delaware.gov/dhss/dph/ss/files/marriage_sg.pdf

Jesse S. Cooper Building
417 Federal Street
Dover, DE 19901
(302) 744-4549

Office hours:
Monday—Friday
8:00 a.m. to 4:15 p.m.
Closed holidays.

- 2) Office of Vital Statistics
Division of Public Health
University Office Plaza - Chopin Building
258 Chapman Road
Newark, DE 19702
(302) 283-7130

Office hours:
Monday—Friday
8:00 a.m. to 4:15 p.m.
Closed holidays.

- 3) Office of Vital Statistics
Division of Public Health
Thurman Adams State Service Center
546 S. Bedford Street
Georgetown, DE 19947
(302) 856-5241

					Office hours: Monday—Friday 8:00 a.m. to 4:15 p.m. Closed holidays.	
DC	\$10.00	http://dccourts.gov/inter-net/public/aud_marriage/marriage.jsf	<p>Your request must include:</p> <p>1) the full names of the parties (including spouse's former name);</p> <p>2) date/year of the marriage - if known; and</p> <p>3) payment</p>	DC Superior Court 500 Indiana Avenue, NW Rm. 4485 Washington, DC 20001	DC Superior Court 500 Indiana Avenue, NW Rm. 4485 Washington, DC 20001	N/A
FL	\$5.00	http://www.floridahealth.gov/%5C/certificates/certificates/marriage/index.html	<p>English: http://www.floridahealth.gov/%5C/certificates/certificates/_documents/dh261-application-marriage-2016.pdf</p> <p>Spanish: http://www.floridahealth.gov/%5C/certificates/certificates/marriage/_documents/DH_261S_App_Marriage.pdf</p>	Department of Health Bureau of Vital Statistics P.O. Box 210 1217 Pearl Street Jacksonville, FL 32231-0042	Department of Health Bureau of Vital Statistics 1217 North Pearl Street, Jacksonville, Florida, 32202 (904) 359-6900 ext. 9000	https://www.vitalcheck.com/marriage-records/florida

			<p>Creole:</p> <p>http://www.floridahealth.gov/%5C/certificates/certificates/marriage/documents/DH_261_H_App_Marriage.pdf</p>			
GA*	\$10.00	http://dph.georgia.gov/marriage-records	<p>http://dph.georgia.gov/sites/dph.georgia.gov/files/Marriage-Divorce-Request-Form.pdf</p>	<p>Vital Records 2600 Skyland Drive, NE Atlanta, GA 30319-3640</p>	<p>State Office of Vital Records 2600 Skyland Drive, NE Atlanta, GA 30319 (404) 679-4702</p> <p>Office hours: Monday—Friday 8:00 a.m. to 4:30 p.m. Closed holidays.</p> <p>In-person requests can also be completed at the Probate Court within the county where the marriage occurred. A list can be found here: http://gaprobate.gov/content/find-your-courts</p>	https://www.vitalcheck.com/marriage-records/georgia
GU*	\$10.00	http://www.dphss.guam.gov/content/office-vital-statistics	<p>Your request must include, if ordering outside Guam:</p> <ol style="list-style-type: none"> 1) Full legal name; 2) Date of event; 3) Photocopy of ID for verification purposes; 	<p>123 Chalan Kareta, Mangilao, Guam 96913</p>	<p>123 Chalan Kareta Mangilao, Guam 96913 (671) 735-7263</p> <p>Office hours: Monday—Friday 8:00 a.m. to 3:30 p.m. Closed holidays.</p>	N/A

			<p>4) Self-addressed stamped envelope for return mail; and</p> <p>5) Special handling instructions.</p>			
HI*	<p>\$10.00 for certificate + \$2.50 administrative fee</p>	http://health.hawaii.gov/vitalrecords/how-to-apply-for-certified-copies-of-vital-records/	http://health.hawaii.gov/vitalrecords/files/2015/06/marriage-revised-2015.pdf	<p>State Department of Health Office of Health Status Monitoring Vital Records Issuance Section P.O. Box 3378 Honolulu, HI 96801-9984</p>	<p>Honolulu Department of Health 1250 Punchbowl Street Rm. 103 Honolulu, HI 96813 (808) 586-4539 (808) 586-4542</p> <p>Office hours: Monday—Friday 7:45 a.m. to 2:30 p.m. Closed holidays.</p>	https://vitrec.ehawaii.gov/vitalrecords/
ID*	<p>\$13.00 Computer Generated</p> <p>\$18.00 Photo static Copy</p>	http://www.healthandwelfare.idaho.gov/Health/VitalRecordsandHealthStatistics/BirthDeathMarriageDivorceCertificates/tabid/82/Default.aspx	<p>English: http://www.healthandwelfare.idaho.gov/Portals/0/Health/Vital%20Records/Idaho-Certificate-Request-Form_English.pdf?ver=2016-07-26-083223-153</p> <p>Spanish: http://www.healthandwelfare.idaho.gov/Portals/0/Health/Vital%20 </p>	<p>Idaho Bureau of Vital Records and Health Statistics P.O. Box 83720 Boise, ID 83720-0036</p>	<p>Idaho Department of Health and Welfare does not provide in-person service.</p> <p>Bureau of Vital Records & Health Statistics 450 West State Street Boise, ID 83702 (208) 334-5988</p>	https://www.vitalcheck.com/marriage-records/idaho

			Records/Request%20form%2007-01-2015%20Spanish.pdf			
IL*	May vary by county.	The Illinois Office of Vital Records does not issue marriage records. You must complete your request online by mail or in-person at the county clerk offices where the marriage occurred: http://www.idph.state.il.us/vitalrecords/Pages/countylisting.htm	N/A	Refer to list of county offices to find the appropriate address for mail-in requests: http://www.idph.state.il.us/vitalrecords/Pages/countylisting.htm	Refer to list of county offices to find the appropriate address for in-person requests: http://www.idph.state.il.us/vitalrecords/Pages/countylisting.htm	https://www.vitalchek.com/marriage-records/illinois
IN*	\$8.00	http://www.in.gov/isdh/20444.htm	http://www.in.gov/isdh/files/Search_ISDH_54764.pdf	Vital Records Indiana State Department of Health P.O. Box 7125, Indianapolis, IN 46206-7125	Indiana Vital Records does not provide in-person service. In-person requests can be completed at the Clerk of the Court where the marriage occurred. A list can be found here: http://www.in.gov/judiciary/2794.htm You may also visit the local health department in the county where the marriage occurred. A list can be found here: http://www.in.gov/isdh/20422.htm	http://www.in.gov/isdh/25993.htm

					m	
IA*	\$20.00	http://idph.iowa.gov/health-statistics/request-record	http://idph.iowa.gov/Portals/1/Files/HealthStatistics/marriage_application.pdf	Iowa Department of Public Health Bureau of Vital Records Lucas State Office Building, 1 st Floor 321 E. 12th Street Des Moines, IA 50319-0075	Bureau of Vital Records Lucas State Office Building, 1 st Floor 321 E. 12th Street Des Moines, IA 50319-0075 (515) 281-4944 Office hours: Monday—Friday 7:00 a.m. to 4:45 p.m. Closed holidays.	https://www.vitalcheck.com/marriage-records/iowa
KS*	\$15.00	http://www.kdheks.gov/vital/marriage_howto.html	http://www.kdheks.gov/vital/download/marriage_fillable.pdf	Office of Vital Statistics Curtis State Office Building 1000 SW Jackson Street, Suite 120 Topeka, Kansas 66612-2221	Office of Vital Statistics Curtis State Office Building 1000 SW Jackson Street, Suite 120 Topeka, Kansas 66612-2221 (785) 296-1400 Office Hours: Monday—Friday 9:00 a.m. to 4:00 p.m. Closed holidays.	https://www.vitalcheck.com/marriage-records/kansas
KY	\$6.00	http://chfs.ky.gov/dph/vital/mdcert.htm	English: http://chfs.ky.gov/NR/rdonlyres/22FD5F7F-4802-43C8-A474-C05824399FE6/0/VS230Rev012012.pdf Spanish: http://chfs.ky.gov/NR/rdonlyres/9E2	Office of Vital Statistics 275 E. Main St. 1E-A Frankfort, KY 40621	Office of Vital Statistics 275 E. Main St. 1E-A Frankfort, KY 40621 (502) 564-4212 Office Hours: Monday—Friday 8:00 a.m. to 3:30 p.m. Closed holidays.	https://www.vitalcheck.com/marriage-records/kentucky

			8ABBA-22E7-4960-98E2-8F9721DE1F04/0/MARRIAGEDIVORCEAPPSPNVS23001302012.pdf			
LA*	\$5.50 (for Orleans Parish Marriage Certificates, other parish fees may vary)	http://new.dhh.louisiana.gov/index.cfm/page/642 Note: The Louisiana Vital Records Registry only maintains marriage records for marriage licenses purchased in Orleans Parish. For marriage records in other parishes, you must contact the Clerk of Court for that parish. You can find contact information here: http://www.laclerksofcourt.org/clerksofcourt.htm	http://new.dhh.louisiana.gov/assets/oph/Center-RS/vitalrec/OrleansMarriageCopyRequest.pdf	Vital Records Registry P.O. Box 60630 New Orleans, LA 70160	Vital Records Registry 1450 Poydras Street, Suite 400 New Orleans, LA 70112 (504) 593-5100 Office hours: Monday—Friday 8:15 a.m.to 3:30 p.m. Closed holidays.	https://www.vitalcheck.com/marriage-records/louisiana
ME*	\$15.00	http://www.maine.gov/dhhs/mecdc/public-health-systems/data-research/vital-records/order/order1.html	http://www.maine.gov/dhhs/mecdc/public-health-systems/data-research/vital-records/documents/pdf-files/vrform2.pdf	Vital Records 11 State House Station 220 Capitol Street Augusta, ME 04333-0011	Vital Records 11 State House Station 220 Capitol Street Augusta, ME 04333-0011 (207) 287-3181 Office hours: Monday—Friday	https://www.vitalcheck.com/marriage-records/maine

					9:00 a.m. to 4:00 p.m. Closed holidays.	
MD*	\$12.00	http://dhmh.maryland.gov/vsa/Pages/marriage.aspx	English: http://dhmh.maryland.gov/vsa/Documents/apps/amcapp.pdf Spanish: http://dhmh.maryland.gov/vsa/Documents/Marriage-revised%2002_16_2016.pdf	Division of Vital Records Department of Health and Mental Hygiene 6764-B Reisterstown Road Baltimore, MD 21215 (410) 764-3038 (800) 832-3277 Office hours: Monday—Friday 8:00 a.m. to 4:00 p.m. Closed holidays.	https://www.vitalcheck.com/marriage-records/maryland	
MA*	In-person: \$20.00 Mail request: \$32.00	http://www.mass.gov/eohhs/gov/departments/dph/programs/admin/dmoa/vitals/obtaining-certified-copies-of-vital-records.html#bymail	http://www.mass.gov/eohhs/docs/dph/vital-records/mail-order-form.pdf	Registry of Vital Records and Statistics 150 Mount Vernon Street, 1st Floor Dorchester, MA 02125-3105 (617) 740-2600 Office hours: Monday—Friday 8:45 a.m. to 4:45 p.m. Closed holidays.	https://www.vitalcheck.com/marriage-records/massachusetts	
MI*	\$34.00	http://www.michigan.gov/mdch/0,1607,7-132-4645---,00.html	http://www.michigan.gov/documents/marriage_pp_6486_7.pdf	Vital Records Request P.O. Box 30721 Lansing, MI 48909	Vital Records Office South Grand Building, 1 st Floor 333 S. Grand Avenue Lansing, MI 48933 (517) 335-8656 Office hours:	https://www.vitalcheck.com/marriage-records/michigan

					Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.	
MN	May vary by county.	The Minnesota Office of Vital Records does not issue marriage records. You must complete your request online by mail or in-person at the county offices where the marriage license was purchased: http://www.health.state.mn.us/divs/chs/osr/mardiv.html	You can conduct a search to find the county where the marriage occurred: https://moms.mn.gov/	Refer to list of county offices to find the appropriate address for mail-in requests: http://www.health.state.mn.us/divs/chs/osr/mardiv.html	Refer to list of county offices to find the appropriate address for in-person requests: http://www.health.state.mn.us/divs/chs/osr/mardiv.html	https://www.vitalcheck.com/marriage-records/minnesota
MS	\$15.00	http://www.msdh.state.ms.us/msdhsite/static/31,0,109.html#Marriage	http://msdh.ms.gov/pubs/forms/Form%20502E_201407.pdf	Mississippi Vital Records P.O. Box 1700 Jackson, MS 39215-1700	Mississippi Vital Records Ridgeland Office 222 Marketridge Dr. Ridgeland, MS 39157 (601) 206-8200 Office hours: Monday—Friday 8:00 a.m. to 4:30 p.m. Closed holidays. In-person requests can also be completed at the office of the Circuit Clerk where the marriage occurred. A list can be found here: http://courts.ms.gov/trialcourts/ch	https://www.vitalcheck.com/marriage-records/mississippi

					ancerycourt/chancerycourt.html	
MO	\$15.00	http://health.mo.gov/data/vitalrecords/applications.php	http://health.mo.gov/data/vitalrecords/pdf/statement.pdf	Bureau of Vital Records P.O. Box 570 Jefferson City, Missouri 65102-0570	<p>Vital Records 930 Wildwood Dr. Jefferson City, MO 65109 (573) 751-6387</p> <p>Office hours: Monday—Friday 8:30 a.m. to 4:30 p.m. Closed holidays.</p> <p>In-person requests can also be completed at the office of the Circuit Clerk where the marriage occurred. A list can be found here: http://health.mo.gov/living/lpha/pdf/printablelisting.pdf</p>	https://www.vitalchek.com/marriage-records/missouri
MT	May vary by county.	The Montana Office of Vital Records does not issue marriage records. You must complete your request online or by mail or in-person at the district court where the marriage license was purchased: http://courts.mt.gov/locator	N/A	Refer to list of district court offices to find the appropriate address for mail-in requests: http://courts.mt.gov/locator	Refer to list of district court offices to find the appropriate address for in-person requests: http://courts.mt.gov/locator	https://www.vitalchek.com/vital-records/montana/montana-vital-recordshs
NE*	\$16.00	http://dhhs.ne.gov/publichealth/Pages/ced_mace	http://dhhs.ne.gov/publichealth/Documents/	Nebraska Vital Records P.O. Box 95065	Vital Records 1033 O Street, Suite 130	https://www.vitalchek.com/marriage-

		rt.aspx	marriage.pdf	Lincoln, NE 68509-5065	Lincoln, NE 68508-3621 (402) 471-2871 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.	records/nebraska
NV	May vary by county.	The Nevada Office of Vital Records does not issue marriage records. You must complete your request online or by mail or in-person at the county recorder offices where the marriage license was purchased: http://dpbh.nv.gov/Programs/Marriage/Marriage_and_Divorce_Records_-_Home/	N/A	Refer to list of county recorder offices to find the appropriate address for mail-in requests. PDF attached.	Refer to list of county recorder offices to find the appropriate address for in-person requests. PDF attached.	https://www.vitalchek.com/marriage-records/nevada
NH*	\$15.00	http://sos.nh.gov/certcopies.aspx	http://nhctca.com/2013/wp-content/uploads/2013/02/Application_Certified_Vital_Record_app.pdf	Division of Vital Records Administration Archives Building 71 South Fruit Street Concord, NH 03301-2410	Division of Vital Records Administration Archives Building 71 South Fruit Street Concord, NH 03301-2410 (603) 271-4650 Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m. Closed holidays.	https://www.vitalchek.com/marriage-records#

NJ*	\$25.00	http://www.nj.gov/health/vital/order-vital/non-genealogical-records/	<p>English instructions: http://www.state.nj.us/health/forms/reg-27_instr1.pdf</p> <p>Spanish: http://www.state.nj.us/health/forms/reg-27.pdf</p>	<p>New Jersey Office of Vital Statistics and Registration Customer Service Unit – Genealogical Requests P.O. Box 370 Trenton, NJ 08625-0370</p>	<p>New Jersey Department of Health Office of Vital Statistics and Registry 140 E Front St. Trenton, NJ 08625 (609) 292-4087 x582</p> <p>Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m. Closed holidays.</p> <p>In-person requests can also be completed at the Local Vital Records Office in the county where the marriage occurred. A list can be found here: http://www.state.nj.us/health/vital/order-vital/local-vital-records/</p>	<p>http://www.nj.gov/health/vital/order-vital/online-requests/index.shtml</p> <p>or</p> <p>https://www.vitalchek.com/marriage-records/new-jersey</p>
NM	May vary by county.	<p>The New Mexico Office of Vital Records does not issue marriage records. You must complete your by mail or in-person at the County Clerk office where the marriage license was purchased: http://www.sos.state.nm.us/Voter_Information/County_Clerk_Information.aspx</p>	N/A	<p>Refer to list of county clerk court to find the appropriate address for mail-in requests: http://www.sos.state.nm.us/Voter_Information/County_Clerk_Information.aspx</p>	<p>Refer to list of county clerk offices to find the appropriate address for in-person requests: http://www.sos.state.nm.us/Voter_Information/County_Clerk_Information.aspx</p>	N/A

NY*	\$22.00-30.00	<p>For marriages outside of New York City: https://www.health.ny.gov/vital_records/marriage.htm</p> <p>For marriages in New York City: http://www.cityclerk.nyc.gov/html/marriage/records.shtml</p>	<p>For marriages outside of New York City: https://www.health.ny.gov/forms/doh-4382.pdf</p> <p>For marriages in New York City: http://www.cityclerk.nyc.gov/downloads/pdf/mail_in_request_form.pdf</p> <p>Spanish instructions: http://cityclerk.nyc.gov/html/marriage/record_req.pdf</p>	<p>For marriages outside of New York City: New York State Department of Health Vital Records Section Certification Unit P.O. Box 2602 Albany, NY 12220-2602</p> <p>For marriages in New York City: City Clerk of New York 141 Worth Street New York, NY 10013 Att: Record Room</p>	<p>For marriages outside of New York City: Vital Records Section 800 North Pearl Street - Room 200 Menands, NY 12204 (518) 474-3077</p> <p>Office hours: Monday—Friday 8:30 a.m. to 5:00 p.m. Closed holidays.</p> <p>For marriages in New York City, you may visit one of the City Clerk offices:</p> <ol style="list-style-type: none"> 1) Manhattan City Clerk 141 Worth Street New York, NY 10013 (212) 669-8090 2) Bronx City Clerk Supreme Court Building 851 Grand Concourse, Room B131 Bronx, NY 10451 <p>Office hours: Monday—Friday 8:30 a.m. to 3:45 p.m. Closed holidays.</p>	<p>For marriages outside of New York City: https://www.vitalcheck.com/marriage-records/new-york</p> <p>For marriages in New York City: https://www1.nyc.gov/cityclerkformsonline/</p>

Office hours:
Monday—Friday
8:30 a.m. to 4:00 p.m.
Closed holidays.

- 3) Brooklyn City Clerk
Brooklyn Municipal Building
210 Joralemon Street, Room
205
Brooklyn, NY 11201
(718) 802-4107

Office hours:
Monday—Friday
8:30 a.m. to 4:00 p.m.
Closed holidays.

- 4) Queens City Clerk
Borough Hall Building
120-55 Queens Boulevard,
Ground Floor, Room G-100
Kew Gardens, NY 11424
(718) 286-2829

Office hours:
Monday—Friday
8:30 a.m. to 3:45 p.m.

- 5) Staten Island City Clerk
Borough Hall Building

					<p>10 Richmond Terrace, Room 311 Staten Island, NY 10301 (718) 816-2290</p> <p>Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m. Closed holidays.</p>	
NC*	\$24.00	http://vitalrecords.nc.gov/order.htm	http://vitalrecords.nc.gov/documents/othercert.pdf	<p>NC Vital Records 1903 Mail Service Center Raleigh, NC 27699-1903</p>	<p>North Carolina Vital Records Cooper Memorial Health Building 225 N. McDowell St. Raleigh, NC 27603-1382 (919) 733-3000</p> <p>Office hours: Monday—Friday 8:00 a.m. to 3:00 p.m. Closed holidays.</p>	https://www.vitalcheck.com/marriage-records/north-carolina
ND	May vary by county.	The North Dakota Office of Vital Records does not issue marriage records. You must complete your request by mail or in-person with the county marriage official where the marriage license was	N/A	Refer to list of county offices to find the appropriate address for mail-in requests: http://www.sos.state.nm.us/Voter_Information/County_Clerk_Information.aspx	Refer to list of county offices to find the appropriate address for in-person requests: http://www.sos.state.nm.us/Voter_Information/County_Clerk_Information.aspx	N/A

		purchased: http://www.ndhealth.gov/vital/marriage.htm				
OH	May vary by county.	The Ohio Office of Vital Records does not issue marriage records. You must complete your request by mail or in-person with the probate court where the marriage license was issued: http://probate.franklincountyohio.gov/about/related-links.cfm	N/A	Refer to list of probate courts to find the appropriate address for mail-in requests: Refer to list of county offices to find the appropriate address for mail-in requests: http://www.sos.state.nm.us/Voter_Information/County_Clerk_Information.aspx	Refer to list of county offices to find the appropriate address for in-person requests: http://www.sos.state.nm.us/Voter_Information/County_Clerk_Information.aspx	N/A
OK	May vary by county.	The Oklahoma Office of Vital Records does not issue marriage records. You must complete your request by mail or in-person with the clerk of court where the marriage license was issued.	N/A	You must complete your request by mail or in-person with the clerk of court where the marriage license was issued.	You must complete your request by mail or in-person with the clerk of court where the marriage license was issued.	N/A
OR*	\$20.00 – \$28.25	http://public.health.oregon.gov/BirthDeathCertificates/GetVitalRecords/pages/index.aspx#order	English: http://public.health.oregon.gov/BirthDeathCertificates/GetVitalRecords/Documents/marryor.pdf	Oregon Vital Records P.O. Box 14050 Portland OR 97293	Center for Health Statistics 800 NE Oregon Street, Room 205 Portland, OR 97232 (971) 673-1190 Office hours: Monday—Friday	https://www.vitalcheck.com/marriage-records/oregon

			Spanish: http://public.health.oregon.gov/BirthDeathCertificates/GetVitalRecords/Documents/4513sm.pdf		8:00 a.m. to 4:30 p.m. Closed holidays. Note: Submit orders at self-service kiosks by 4:00 p.m.	
PA	May vary by county.	The Pennsylvania Office of Vital Records does not issue marriage records. You must complete your request by mail or in-person with the county court where the marriage license was issued: http://www.health.pa.gov/MyRecords/Certificates/MarriageAndDivorceCertificates/Pages/default.aspx#.V8csY5MrLR0	N/A	Refer to list of county courts to find the appropriate address for mail-in requests: http://www.health.pa.gov/MyRecords/Certificates/MarriageAndDivorceCertificates/Pages/default.aspx#.V8csY5MrLR0	Refer to list of county courts to find the appropriate address for in-person requests: http://www.health.pa.gov/MyRecords/Certificates/MarriageAndDivorceCertificates/Pages/default.aspx#.V8csY5MrLR0	N/A
PR*	\$12.00	Spanish: https://serviciosonlinea.gobierno.pr/Salud/Servicios.aspx?goto=matrimonio http://www.salud.gov.pr/Servicios-al-Ciudadano/Pages/Registro-Demografico.aspx	English: https://serviciosonlinea.gobierno.pr/Salud/Marriage%20Mail-In%20Application.pdf Spanish: http://www.salud.gov.pr/Servicios-al-Ciudadano/Documents/Solicitud%20Matrimonio%20por%20Correo.pdf	Department of Health Demographic Registry P.O. Box 11854 Fernandez Juncos Station San Juan, PR 00910	Refer to list of local offices to find the appropriate address for in-person requests: http://www.salud.gov.pr/Servicios-al-Ciudadano/Documents/Directorio%20Oficinas%20Locales%20del%20RD.pdf (866) 842-6765	https://www.vitalcheck.com/marriage-records/puerto-rico

RI	\$20.00	http://www.health.ri.gov/records/#where	http://health.ri.gov/forms/recordrequest/Marriage.doc	<p>RI Department of Health, Office of Vital Records 3 Capitol Hill, Room 101 Providence, RI 02908-5097</p>	<p>In-person requests are available from: Department of Health 3 Capitol Hill, Room 101 Providence, RI 02908</p> <p>Office hours: Monday—Friday 12:30 p.m. to 4:00 p.m.</p> <p>In-person requests can also be completed at the local clerk office in the city or town where the marriage occurred. A list can be found here: http://www.health.ri.gov/records/#where</p>	https://www.vitalcheck.com/marriage-records/rhode-island
SC*	\$12.00	http://www.scdhec.gov/VitalRecords/MarriageCertificates/	<p>English: http://www.scdhec.gov/library/d-0639.pdf</p> <p>Spanish: http://www.scdhec.gov/library/d-0639s.pdf</p>	<p>DHEC Office of Vital Records 2600 Bull Street Columbia, SC 29201</p>	<p>DHEC State Vital Records Office 2600 Bull St. Columbia, SC 29201 (803) 898-3630</p> <p>Office hours: Monday—Friday 8:30 a.m. to 4:00 p.m. Closed holidays.</p>	https://www.vitalcheck.com/marriage-records/south-carolina
SD*	\$15.00	https://doh.sd.gov/records/marriage-records.aspx?	https://doh.sd.gov/documents/Records/StateApplication.pdf	<p>Vital Records State Department of Health 207 East Missouri</p>	<p>Vital Records South Dakota Department of Health 207 E. Missouri Ave., Suite 1A</p>	https://www.vitalcheck.com/marriage-records/south-dakota

				Avenue, Suite 1A Pierre, SD 57501	<p>Pierre, SD 57501</p> <p>Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays.</p> <p>In-person requests can also be completed at any Register of Deeds clerk office in the city or town where the marriage occurred. A list can be found here: https://doh.sd.gov/records/county/</p>	
TN	\$15.00	https://www.tn.gov/health/section/vital-records	<p>English: https://www.tn.gov/assets/entities/health/attachments/PH-1670EN.pdf</p> <p>Spanish: https://www.tn.gov/assets/entities/health/attachments/PH-1670SP.pdf</p>	Tennessee Vital Records Andrew Johnson Tower, 1 st Floor 710 James Robertson Parkway Nashville, TN 37243 (615) 741-1763 (855) 809-0072	<p>Tennessee Vital Records Andrew Johnson Tower, 1st Floor 710 James Robertson Parkway Nashville, TN 37243 (615) 741-1763 (855) 809-0072</p> <p>Office hours: Monday, Wednesday, and Friday 8:00 a.m. to 4:00 p.m. Tuesday and Thursday 8:00 a.m. to 6:00 p.m. Closed holidays.</p>	https://www.vitalchek.com/marriage-records/tennessee
TX*	May vary by county.	The Texas Office of Vital Records does not issue marriage records. You must complete your	N/A	Refer to list of county courts to find the appropriate address for mail-in	Refer to list of county courts to find the appropriate address for in-person requests: http://www.dshs.texas.gov	https://txapps.texas.gov/tolapp/ovra/index.htm

		request by mail or in-person with the county clerk where the marriage license was issued: http://www.dshs.texas.gov/vs/field/localremotedistrict.shtm		requests: http://www.dshs.texas.gov/vs/field/localremotedistrict.shtm	ov/vs/field/localremotedistrict.shtm	or https://www.vitalchek.com/marriage-records/texas
UT*	\$18.00	https://vitalrecords.utah.gov/certificates/order-a-vital-record-certificate For marriages after 2010, you must complete your request online or by mail or in-person with the county clerk where the marriage occurred: https://vitalrecords.utah.gov/wp-content/uploads/Utah-County-Clerks.pdf	For marriages prior to 2010: https://vitalrecords.utah.gov/wp-content/uploads/MarriageDivorce-Certificate-Request-Application.pdf	For marriages prior to 2010: Certification Office of Vital Records P.O. Box 141012 Salt Lake City, UT 84114-1012	For marriages prior to 2010: Cannon Health Building 288 North 1460 West Salt Lake City, Utah (801) 538-6105 Office hours: Monday—Friday 8:00 a.m. to 5:00 p.m. Closed holidays. For marriages after 2010, refer to list of county clerks to find the appropriate address for in-person requests: https://vitalrecords.utah.gov/wp-content/uploads/Utah-County-Clerks.pdf	https://www.vitalchek.com/marriage-records/utah
VT	\$10.00	For marriages that occurred more than 5 years ago: https://www.sec.state.vt.us/archives-records/vital-	For marriages that occurred more than 5 years ago: https://www.sec.state.vt.us/media/345355/vsara-	For marriages that occurred more than 5 years ago: Vermont State Archives and Records	For marriages that occurred more than 5 years ago: Vermont State Archives and Records Administration 1078 US Route 2, Middlesex	For marriages that occurred more than 5 years ago: https://secure.vermont.gov/VSARA/vitalrecords/

		records/certified-copies.aspx For marriages within the last 5 years, you must complete your request online or by mail or in-person with the Vermont Department of Health or the clerk where the marriage occurred: http://healthvermont.gov/research/records/vitalrecords.aspx or https://www.sec.state.vt.us/media/476665/TownClerkGuide.pdf	09_marriage_civilunion.pdf For marriages within the last 5 years: http://healthvermont.gov/research/records/marriage_form.aspx	Administration 1078 US Route 2, Middlesex Montpelier, VT 05633-7701 For marriages within the last 5 years: Vermont Department of Health Vital Records P.O. Box 70 Burlington, VT 05402-0070	Montpelier, VT 05633-7701 For marriages within the last 5 years: Vermont Department of Health 108 Cherry Street, Suite 303 Burlington, VT 05402 (802) 863-7275 Office hours: Monday—Friday 7:45 a.m. to 4:30 p.m. Closed holidays.	
VA*	\$12.00	http://www.vdh.virginia.gov/vital-records/	English: http://www.vdh.virginia.gov/content/uploads/sites/93/2016/07/appform.pdf Spanish: http://www.vdh.virginia.gov/content/uploads/sites/93/2016/07/appform_Spanish.doc	Division of Vital Records P. O. Box 1000 Richmond, Virginia 23218	The Virginia Department of Health Division of Vital Records 2001 Maywill Street Richmond, Virginia 23230 (804) 662-6200 Office hours: Monday—Friday 8:00 a.m. to 4:45 p.m. Saturday 8:00 a.m. to 12:00 p.m.	https://www.vitalcheck.com/vital-records/virginia

					<p>Closed holidays.</p> <p>Note: You may also purchase certified copies of vital records at any full service DMV location.</p>	
VI	\$2.00	http://www.cdc.gov/nchs/w2w/virgin_islands.htm	N/A	<p>1) Saint Croix: Chief Deputy Clerk Family Division Territorial Court of the Virgin Islands P.O. Box 929 Christiansted St. Croix, VI 00820</p> <p>2) Saint Thomas/John: Clerk of the Territorial Court of the Virgin Islands Family Division P.O. Box 70 Charlotte Amalie St. Thomas, VI 00801</p>	<p>Bureau of Vital Records and Statistical Services Virgin Islands Department of Health Charlotte Amalie St. Thomas, VI 00801</p>	N/A
WA	\$20.00	http://www.doh.wa.gov/LicensesPermitsandCertificates/BirthDeathMarriageandDivorce/OrderCertificates	http://www.doh.wa.gov/Portals/1/Documents/Pubs/422-104-MarriageDivorceCertificateMailOrderForm.pdf	<p>Center for Health Statistics Department of Health P.O. Box 9709 Olympia, WA 98507-9709</p>	<p>Center for Health Statistics Department of Health 101 Israel Road SE Tumwater, WA 98501 (360) 236-4300</p> <p>Office hours: Monday – Friday</p>	https://www.vitalcheck.com/vital-records/washington

					<p>8:00 a.m. to 4:30 p.m. Closed holidays.</p> <p>Note: Same day orders after 4:00 p.m. may be processed next business day.</p>	
WV	\$12.00	http://www.wvdhhr.org/bph/hsc/vital/birthcert.asp	http://www.wvdhhr.org/bph/hsc/vital/forms/marriage.pdf	<p>Vital Registration Room 165 350 Capitol Street Charleston, WV 25301-3701</p>	<p>Vital Registration, 350 Capitol Street, Room 165 Charleston, WV 25301-3701 (304) 558-2931</p> <p>Office hours: Monday—Friday 8:30 a.m. to 5:00 p.m. Closed holidays.</p>	https://www.vitalcheck.com/vital-records/west-virginia
WI*	\$20.00	https://www.dhs.wisconsin.gov/vitalrecords/marriage.htm	https://www.dhs.wisconsin.gov/forms/f0/f05281.pdf	<p>Wisconsin Vital Records Office P.O. Box 309 Madison, WI 53701-0309</p>	<p>Wisconsin Vital Records Office 1 West Wilson Street, Room 160 Madison, WI 53703 (608) 266-1373 (608) 266-1371</p> <p>Office hours: Monday—Friday 8:00 a.m. to 4:15 p.m. Closed holidays.</p>	https://www.vitalcheck.com/vital-records/wisconsin
WY	\$8.00	http://health.wyo.gov/rfhd/vital_records/marriage_divorce.html	https://health.wyo.gov/wp-content/uploads/2016/06/WDH_VSS-Marriage-and-Divorce-Application-Form-1-	<p>Vital Statistics Services 2300 Capitol Avenue Hathaway Building Cheyenne, WY 82002</p>	<p>Vital Statistics Services 2300 Capitol Ave. Hathaway Building, Room 172 Cheyenne, WY 82002 (307) 777-7591</p>	N/A

			2016.pdf		Office hours: Monday—Friday 8:00 a.m. to 4:00 p.m. Closed holidays.	
--	--	--	--------------------------	--	--	--

Appendix J: Model Letter: State FOIA Request (State Agency Records)
For the latest version of this model letter, please visit: <http://www.maldef.org>

Date

Full Legal Name

Address Line 1

Address Line 2

Phone Number

Email Address (if available)

Custodian of Records

State Agency

Address Line 1

Address Line 2

Other Contact Information (Phone, Email, Fax, etc.)

Re: Request Under the State Freedom of Information Act

Dear FOIA Officer:

I write to request that certain information be provided to me under:

State and Relevant FOIA Statute

Please respond with a grant or denial of records sought through this written request within the time allowed under the state statute.

Unless otherwise stated, all requests for “records” refer to all records related to this request that were prepared, received, transmitted, collected, or maintained by your agency. Furthermore, the scope of the search should not be limited to records originating from your agency and should be construed to include records that are currently in the possession of any state contractors for purposes of records management. Records should be provided in electronic format wherever possible. Acceptable formats include .PDF, .DOC, .XLS, .JPG, .GIF, .TIF, or similar.

The records requested are as follows:

List documents, records, and/or information as specifically and in as much detail as possible. Attach supplemental pages if needed. The type of records will depend on the state agency.

I understand that you may charge a fee to make copies; if so, please contact me so that I can arrange payment. I appreciate your prompt attention to this request. All responsive records, along with correspondence related to this request, should be disclosed to me at the above email or physical mailing address. Should you be unable to provide me the requested records, please note the reason why as well as the statutory exemption or exception under which this reason falls.

Please let me know if you have any questions. Thank you for your assistance.

Sincerely,

Signature

Printed Full Legal Name

Appendix K: Chart: State Tax Request Procedure (State Tax Records)
For the latest version of this chart, please visit: <http://www.maldef.org>

***Please note that provided links and information may have changed since publishing. It is important to verify information where possible.**

State	Link to State Forms and Information
AL	Form with instructions: http://www.ador.state.al.us/incometax/f4506a.pdf
AK	N/A: Alaska does not have an individual state income tax.
AZ	Form with instructions: https://www.azdor.gov/Portals/0/ADOR-forms/01000/450_f.pdf
AR	Form with instructions: http://www.dfa.arkansas.gov/offices/incomeTax/individual/Documents/AR4506_RE.pdf
CA	Form with instructions: https://www.ftb.ca.gov/forms/misc/3516.pdf Additional information: https://www.ftb.ca.gov/individuals/faq/ivr/615.shtml
CO	Form with instructions: https://www.colorado.gov/pacific/sites/default/files/DR5714.pdf Note: There is also an online system to make requests: https://www.colorado.gov/revenueonline/_/
CT	Form with instructions: http://www.ct.gov/drs/lib/drs/fillable_forms/2005forms/lgl-002.pdf Note: The current year's and prior two years' returns are available through an online system. Earlier forms must be requested here: http://www.ct.gov/drs/cwp/view.asp?a=1433&q=395840&drsPNavCtr= 40959 40961 51756 #51757s/lgl-002.pdf Additional Information: http://www.ct.gov/drs/cwp/view.asp?a=1454&Q=266110&drsPNavCtr= #41213
DC	Requests can only be made over the phone or in person. You may contact the Office of Tax and Revenue at (202) 727-4829 to make your request or make an in-person request (1101 4th St. S.W. Washington, DC 20024). Note: To request a previously filed tax return you must provide your social security number or Individual Tax Identification Number (ITIN).
DE	Requests can be made over the phone or through email. You may contact the Public Service Bureau at (302) 577-8200 or email your request to personaltax@state.de.us . Note: To request a previously filed tax return, you must provide your: 1) social security number, 2) name, 3) your filing status for that year, 4) the amount of refund or balance due, 5) and your address on the return at that time.
FL	N/A: Florida does not have an individual state income tax.
GA	Form with instructions: https://dor.georgia.gov/sites/dor.georgia.gov/files/related_files/document/TSD_Taxpayer_Return_Request_Form_RET001.pdf Note: Additional information is available by contacting the Taxpayer Services Division at (404) 417-6760.
GU	Form with instructions: http://www.govguamdocs.com/revtax/docs/UCC-3RequestforInformationorCopies.pdf
HI	Form with instructions: http://files.hawaii.gov/tax/forms/2014/l72.pdf
ID	Form with instructions: http://tax.idaho.gov/forms/EFO00141_01-24-2012.pdf
IL	Form with instructions: http://www.revenue.state.il.us/taxforms/Other/ReturnCopy/IL-4506.pdf
IN	Contact your district office to request a copy of a previously filed tax return. District office phone numbers can be found at: http://www.in.gov/dor/3390.htm

IA	Forms with instructions: https://tax.iowa.gov/sites/files/idr/forms1/Final%20IA4506%20RequestforCopyofTaxReturn(95504)%20.pdf
KS	Forms with instructions: http://www.ksrevenue.org/pdf/do41.pdf
KY	<p>The Department of Revenue can provide copies of past state tax returns upon written request. Your request must include: 1) your name, 2) your Social Security Number or ITIN, 3) the year(s) of the tax return you are requesting, 4) your current mailing address, 5) a daytime phone number, 6) a copy of photo identification, and 7) your signature.</p> <p>You may fax your request to (502) 564-3392, Attn: Shirley. You may also mail your request to the Kentucky Department of Revenue, P.O. Box 181, St. 56, Frankfort, KY 40602.</p>
LA	<p>You may complete your request online: https://esweb.revenue.louisiana.gov/ContactUs/default.aspx?who=individual&type=tax</p> <p>You can contact the Department of Revenue at (225) 219-0102 to request a copy of any tax returns on file.</p> <p>You can also submit your request by mail. Your request must include: 1) your complete name, 2) address, 3) social security number or ITIN, 4) a contact phone number, and 5) the year(s) of the tax return you are requesting. You can mail your request to Louisiana Department of Revenue, P.O. Box 201, Baton Rouge, LA 70821.</p>
ME	<p>The Department of Revenue can provide copies of past state tax returns upon written request. Your request must include: 1) your name, 2) the last four digits of your Social Security Number or ITIN, 3) the year(s) of the tax return you are requesting, 4) your mailing address at the time the tax return was filed, and 5) your current mailing address.</p> <p>You can email your request to Income.Tax@maine.gov.</p>
MD	<p>The Department of Revenue can provide copies of past state tax returns upon written request. Your request must include: 1) your name, 2) the last four digits of your Social Security Number or ITIN, 3) the year(s) of the tax return you are requesting, 4) your current mailing address, and 5) your signature.</p> <p>You can mail to Revenue Administration Division, Attn: Central Files, 110 Carroll Street, Annapolis, MD 21401. Or you can fax your request to 410-974-2967.</p>
MA	Forms with instructions: http://www.mass.gov/dor/docs/dor/forms/miscform/pdfs/m-4506.pdf
MI	<p>Form with instructions: http://www.michigan.gov/documents/4095_100866_7.pdf</p> <p>Additional information: http://www.michigan.gov/taxes/0,4676,7-238-75545_43715-153676--,00.html</p>
MN	Form with instructions: http://www.revenue.state.mn.us/Forms_and_Instructions/m100.pdf
MS	Form with instructions: https://www.dor.ms.gov/Forms/forms_70-698.pdf
MO	Form with instructions: http://dor.mo.gov/forms/1937.pdf
MT	Form with instructions: https://revenue.mt.gov/Portals/9/forms/amended_returns/RTI.pdf
NE	Form with instructions: http://www.revenue.nebraska.gov/tax/current/fill-in/f_23.pdf
NV	N/A: Nevada does not have an individual state income tax.
NH	N/A: Nevada does not have an individual state income tax on wages or earnings.
NM	Unknown, please contact the agency responsible for taxing in NM.
NJ	Instructions with link to form: http://www.state.nj.us/treasury/taxation/obt_copies.shtml

NY	Form with instructions: https://www.tax.ny.gov/pdf/current_forms/misc/df505_fill_in.pdf Additional information and online requests: https://www.tax.ny.gov/help/contact/get-copy-of-return.htm
NC	The Department of Revenue can provide copies of past state tax returns upon written request. Your request must include: 1) your name as it appeared on the tax return needed, 2) Social Security Number or ITIN, 3) the year(s) of the tax return you are requesting, and 4) your current mailing address. You may fax your request to (919) 733-5750. You may also mail your request to the North Carolina Department of Revenue, Customer Service, P.O. Box 1168, Raleigh, NC 27602.
ND	Form with instructions: http://www.nd.gov/veterans/files/resource/Request-for-Tax-Information.pdf
OH	You may view your tax transcripts online: your request online: https://esweb.revenue.louisiana.gov/ContactUs/default.aspx?who=individual&type=tax You can contact the Department of Taxation at (800) 282-1782 to request a copy of any tax returns on file. You can also submit your request by mail. Your request may want to include: 1) your name as it appeared on the tax return needed, 2) Social Security Number or ITIN, 3) the year(s) of the tax return you are requesting, and 4) your current mailing address. You can mail your request to Ohio Department of Taxation, P.O. Box 2476, Columbus Ohio 43216-2476.
OK	Form with instructions: https://www.ok.gov/tax/documents/599.pdf
OR	You can also submit your request by mail. Your request must include: 1) your name, 2) Social Security Number or ITIN, 3) the year(s) of the tax return you are requesting, 4) your current mailing address, 5) daytime phone number, 6) signature, and 7) a check for \$4.00 per year requested. You can mail your request to Ohio Department of Revenue, 955 Center St. NE, Salem, OR 97301.
PA	Form with instructions: http://www.revenue.pa.gov/FormsandPublications/otherforms/Documents/rev-467.pdf
PR	Contact for information: http://www.hacienda.gobierno.pr/
RI	Form with instructions: http://www.tax.ri.gov/forms/2007/pers/RI-45061.pdf
SC	Form with instructions: https://dor.sc.gov/forms-site/Forms/SC4506.pdf
SD	N/A: South Dakota does not have an individual state income tax.
TN	N/A: Tennessee does not have an individual state income tax.
TX	N/A: Texas does not have an individual state income tax.
UT	Form with instructions: http://tax.utah.gov/forms/current/tc-880.pdf Additional instructions: http://incometax.utah.gov/topics/copies-of-returns
VT	Instructions: http://tax.vermont.gov/tax-forms/prior-year-forms
VA	Form with instructions: http://www.tax.virginia.gov/sites/tax.virginia.gov/files/taxforms/miscellaneous/any/va-1-any_6.pdf Additional instructions: http://www.tax.virginia.gov/content/copies-tax-returns
VI	Contact for information: http://www.vibir.gov/
WA	N/A: Washington does not have an individual state income tax.
WV	Call for information: (800) 982-8297 Additional information: http://tax.wv.gov/Individuals/HowDoI/Pages/IndividualsHowDoI.aspx

WI	Form with instructions: https://www.revenue.wi.gov/forms/misc/p-521f.pdf Additional information: http://www.revenue.wi.gov/faqs/ise/request.html
WY	N/A: Wyoming does not have an individual state income tax on wages or earnings.

Appendix L: Model Letter: Federal FOIA Request (Federal Agency Records)
For the latest version of this model letter, please visit: <http://www.maldef.org>

Date

Full Legal Name

Address Line 1

Address Line 2

Phone Number

Email Address (if available)

FOIA Officer or Department

Federal Agency

Address Line 1

Address Line 2

Other Contact Information (Phone, Email, Fax, etc.)

Re: Request Under the Federal Freedom of Information Act

Dear FOIA Officer:

I write to request that certain information be provided to me pursuant to the Freedom of Information Act (FOIA). Please respond with a grant or denial of records sought within twenty (20) working days of this written request or at your earliest convenience pursuant to 5 U.S.C. § 552 (G)(6)(A)(i).

Unless otherwise stated, all requests for “records” refer to all records related to this request that were prepared, received, transmitted, collected, or maintained by your agency. Furthermore, the scope of the search should not be limited to records originating from your agency and should be construed to include records that are currently in the possession of any U.S. government contractors for purposes of records management. Records should be provided in electronic format wherever possible. Acceptable formats include .PDF, .DOC, .XLS, .JPG, .GIF, .TIF, or similar.

The records requested are as follows:

List documents, records, and/or information as specifically and in as much detail as possible. Attach supplemental pages if needed. The type of records will depend on the federal agency.

I understand that you may charge a fee to make copies; if so, please contact me so that I can arrange payment. I appreciate your prompt attention to this request. All responsive records, along with correspondence related to this request, should be disclosed to me at the above email or physical mailing address. Should you be unable to provide me the requested records, please note the reason why as well as the statutory exemption or exception under which this reason falls.

Please let me know if you have any questions. Thank you for your assistance.

Sincerely,

Signature

Printed Full Legal Name

Appendix M: Form: Military Records Request SF-180 (Federal Agency Records)
For the latest version of this form, please visit: <http://www.maldef.org>

INSTRUCTION AND INFORMATION SHEET FOR SF 180, REQUEST PERTAINING TO MILITARY RECORDS

1. General Information. The Standard Form 180, Request Pertaining to Military Records (SF180) is used to request information from military records. Certain identifying information is necessary to determine the location of an individual's record of military service. Please try to answer each item on the SF 180. If you do not have and cannot obtain the information for an item, show "NA," meaning the information is "not available." Include as much of the requested information as you can. Incomplete information may delay response time. To determine where to mail this request see Page 2 of the SF180 for record locations and facility addresses.

Online requests may be submitted to the National Personnel Records Center (NPRC) by a veteran or deceased veteran's next of kin using eVetRecs at <http://www.archives.gov/veterans/military-service-records/>.

2. Personnel Records/Military Human Resource Records/Official Military Personnel File (OMPF) and Medical Records/Service Treatment Records (STR). Personnel records of military members who were discharged, retired, or died in service less than 62 years ago and medical records are in the legal custody of the military service department and are administered in accordance with rules issued by the Department of Defense and the Department of Homeland Security (DHS, Coast Guard). STR's of persons on active duty are generally kept at the local servicing clinic, and usually are available from the Department of Veterans Affairs approximately 40 days after the last day of active duty. (See item 3, Archival Records, if the military member was discharged, retired or died in service over 62 years ago.)

a. **Release of information:** Release of information is subject to restrictions imposed by the military services consistent with Department of Defense regulations and the provisions of the Freedom of Information Act (FOIA) and the Privacy Act of 1974. The service member (either past or present) or the member's legal guardian has access to almost any information contained in that member's own record. An authorization signature, of the service member or the member's legal guardian, is needed in Section III of the SF180. Others requesting information from military personnel records and/or STR's must have the release authorization in Section III of the SF 180 signed by the member or legal guardian. If the appropriate signature cannot be obtained, only limited types of information can be provided. If the former member is deceased, surviving next of kin may, under certain circumstances, be entitled to greater access to a deceased veteran's records than a member of the general public. The next of kin may be any of the following: unremarried surviving spouse, father, mother, son, daughter, sister, or brother. Requesters **must provide proof of death, such as a copy of a death certificate, newspaper article (obituary) or death notice, coroner's report of death; funeral director's signed statement of death, or verdict of coroner's jury.**

b. **Fees for records:** There is no charge for most services provided to service members or next of kin of deceased veterans. A nominal fee is charged for certain types of service. In most instances service fees cannot be determined in advance. If your request involves a service fee, you will be notified.

3. Archival Records. Personnel records of military members who were discharged, retired, or died in service 62 or more years ago have been transferred to the legal custody of NARA and are referred to as "archival" records.

a. **Release of Information:** Archival records are open to the public. The Privacy Act of 1974 does not apply to archival records, therefore, written authorization from the veteran or next of kin is not required. However, in order to protect the privacy of the veteran, his/her family, and third parties named in the records, the personal privacy exemption of the Freedom of Information Act (5 U.S.C. 552 (b) (6)) may still apply and preclude the release of some information.

b. **Fees for Archival Records:** Access to archival records is granted by offering copies of the records for a fee (44 U.S.C. 2116 (c)). You will be notified if there is a charge for photocopies of documents contained in the record you are requesting. For more information see <http://www.archives.gov/st-louis/archival-programs/military-personnel-archival/ompf-archival-requests.html>.

4. Where reply may be sent. The reply may be sent to the service member or any other address designated by the service member or other authorized requester.

5. Definitions and abbreviations. DISCHARGED -- the individual has no current military status; SERVICE TREATMENT RECORD (STR) -- The chronology of medical, mental health and dental care received by service members during the course of their military career (does not include records of treatment while hospitalized); TDRL -- Temporary Disability Retired List.

6. Service completed before World War I. National Archives Trust Fund (NATF) forms must be used to request these records. Obtain the forms by e-mail from inquire@nara.gov or write to the Code 6 address on page 2 of the SF 180.

PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this form. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and Public Law 104-134 (April 26, 1996), as amended in title 31, section 7701. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the facility servicing the service member's record may not have all of the information needed to locate it. The purpose of the information on this form is to assist the facility servicing the records (see the address list) in locating the correct military service record(s) or information to answer your inquiry. This form is then retained as a record of disclosure. The form may also be disclosed to Department of Defense components, the Department of Veterans Affairs, the Department of Homeland Security (DHS, U.S. Coast Guard), or the National Archives and Records Administration when the original custodian of the military health and personnel records transfers all or part of those records to that agency. If the service member was a member of the National Guard, the form may also be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served.

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

Public burden reporting for this collection of information is estimated to be five minutes per request, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (NHP), 8601 Adelphi Road, College Park, MD 20740-6001. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS AS INDICATED IN THE ADDRESS LIST ON PAGE 2 OF THE SF 180.

REQUEST PERTAINING TO MILITARY RECORDS

* Requests from veterans or deceased veteran's next-of-kin may be submitted online by using eVetRecs at <http://www.archives.gov/veterans/military-service-records/>*

(To ensure the best possible service, please thoroughly review the accompanying instructions before filling out this form. Please print clearly or type.)

SECTION I - INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much as possible.)

1. NAME USED DURING SERVICE (last, first, and middle)		2. SOCIAL SECURITY NO.	3. DATE OF BIRTH	4. PLACE OF BIRTH		
5. SERVICE, PAST AND PRESENT (For an effective records search, it is important that all service be shown below.)						
	BRANCH OF SERVICE	DATE ENTERED	DATE RELEASED	OFFICER	ENLISTED	SERVICE NUMBER (If unknown, write "unknown")
a. ACTIVE COMPONENT						
b. RESERVE COMPONENT						
c. NATIONAL GUARD						
6. IS THIS PERSON DECEASED? If "YES" enter the date of death. <input type="checkbox"/> NO <input type="checkbox"/> YES			7. IS (WAS) THIS PERSON RETIRED FROM MILITARY SERVICE? <input type="checkbox"/> NO <input type="checkbox"/> YES			

SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED

1. CHECK THE ITEM(S) YOU ARE REQUESTING:

- ☐ **DD Form 214 or equivalent.** When was the DD Form(s) 214 issued? YEAR(S): _____
If more than one period of service was performed, even in the same branch, there may be more than one DD214.
This form contains information normally needed to verify military service. A copy may be sent to the veteran, the deceased veteran's next of kin, or other persons or organizations if authorized in Section III, below. **An UNDELETED DD214 is ordinarily required to determine eligibility for benefits.** Sensitive items, such as, the character of separation, authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and dates of time lost are usually shown.
An undeleted copy will be sent unless you specify a deleted copy. Indicate here if you want a deleted copy of the DD Form 214. ☐
The following items are deleted: authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and for separations after June 30, 1979, character of separation and dates of time lost.
- ☐ **All Documents in Official Military Personnel File (OMPF)**
- ☐ **Medical Records** (Includes Service Treatment Records, Health (outpatient) and dental records.) If hospitalized (inpatient), the facility name and date for each admission **must** be provided: _____
- ☐ **Other (Specify):** _____

2. **PURPOSE:** (An explanation of the purpose of the request is **strictly voluntary**; however, such information may help to provide the best possible response and may result in a faster reply. Information provided will in no way be used to make a decision to deny the request.) Check appropriate box:

- ☐ Benefits ☐ Employment ☐ VA Loan Programs ☐ Medical ☐ Genealogy ☐ Correction ☐ Personal
☐ Other, explain: _____

SECTION III - RETURN ADDRESS AND SIGNATURE

1. **REQUESTER IS:** (Signature Required in # 3 below of veteran, next of kin, legal guardian, authorized government agent or "other" authorized representative. If "other" authorized representative, provide copy of authorization letter.) No signature required for Archival records.

- ☐ Military service member or veteran identified in Section I, above
☐ Next of kin of deceased veteran: _____

(Relationship)

- ☐ Legal guardian (Must submit copy of court appointment.)
☐ Other (specify) _____

MUST HAVE PROOF OF DEATH - See item 2a on instruction sheet.

2. SEND INFORMATION/DOCUMENTS TO:

(Please print or type. See item 4 on accompanying instructions.)

3. **AUTHORIZATION SIGNATURE WHEN REQUIRED** (See items 2a or 3a on accompanying instructions.) I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the information in this Section III is true and correct. No signature required for Archival records.

Name		Signature Required - Do not print		Date
Street		Daytime phone		Fax Number
City	State	Zip Code	Email address	

This form is available at <http://www.archives.gov/research/order/standard-form-180.pdf> on the National Archives and Records Administration (NARA) web site.

LOCATION OF MILITARY RECORDS

The various categories of military service records are described in the chart below. For each category there is a code number which indicates the address at the bottom of the page to which this request should be sent. Please refer to the Instruction and Information Sheet accompanying this form as needed.

BRANCH	CURRENT STATUS OF SERVICE MEMBER	ADDRESS CODE	
		Personnel Record	Medical or Service Treatment Record
AIR FORCE	Discharged, deceased, or retired before 5/1/1994	14	14
	Discharged, deceased, or retired 5/1/1994 – 9/30/2004	14	11
	Discharged, deceased, or retired on or after 10/1/2004	1	11
	Active (including National Guard on active duty in the Air Force), TDRL, or general officers retired with pay	1	
	Reserve, retired reserve in nonpay status, current National Guard officers not on active duty in the Air Force, or National Guard released from active duty in the Air Force	2	
	Current National Guard enlisted not on active duty in the Air Force	13	
COAST GUARD	Discharge, deceased, or retired before 1/1/1898	6	
	Discharged, deceased, or retired 1/1/1898 – 3/31/1998	14	14
	Discharged, deceased, or retired on or after 4/1/1998	14	11
	Active, reserve, or TDRL	3	
MARINE CORPS	Discharged, deceased, or retired before 1/1/1905	6	
	Discharged, deceased, or retired 1/1/1905 – 4/30/1994	14	14
	Discharged, deceased, or retired 5/1/1994 – 12/31/1998	14	11
	Discharged, deceased, or retired on or after 1/1/1999	4	11
	Individual Ready Reserve	5	
	Active, Selected Marine Corps Reserve, TDRL	4	
ARMY	Discharged, deceased, or retired before 11/1/1912 (enlisted) or before 7/1/1917 (officer)	6	
	Discharged, deceased, or retired 11/1/1912 – 10/15/1992 (enlisted) or 7/1/1917 – 10/15/1992 (officer)	14	
	Discharged, deceased, or retired after 10/16/1992	14	11
	Active enlisted, officers	7	
	Former National Guard/USAR personnel	14	
NAVY	Discharged, deceased, or retired before 1/1/1886 (enlisted) or before 1/1/1903 (officer)	6	
	Discharged, deceased, or retired 1/1/1886 – 1/30/1994 (enlisted) or 1/1/1903 – 1/30/1994 (officer)	14	14
	Discharged, deceased, or retired 1/31/1994 – 12/31/1994	14	11
	Discharged, deceased, or retired on or after 1/1/1995	10	11
	Active, reserve, or TDRL	10	
PHS	Public Health Service - Commissioned Corps officers only	12	

ADDRESS LIST OF CUSTODIANS (BY CODE NUMBERS SHOWN ABOVE) – Where to write/send this form

1	Air Force Personnel Center HQ AFPC/DPSIRP 550 C Street West, Suite 19 Randolph AFB, TX 78150-4721	6	National Archives & Records Administration Old Military and Civil Records (NWCTB-Military) Textual Services Division 700 Pennsylvania Ave., N.W. Washington, DC 20408-0001	11	Department of Veterans Affairs Records Management Center P.O. Box 5020 St. Louis, MO 63115-5020
2	Air Reserve Personnel Center Records Management Branch (DPTARA) 18420 E. Silver Creek Ave. Bldg. 390 MS 68 Buckley AFB, CO 80011	7	US Army Human Resources Command ATTN: AHRC-PDR-V 1600 Spearhead Division Ave., Dept 420 Fort Knox, KY 40122-5402 askhrc.army@us.army.mil	12	Division of Commissioned Corps Officer Support ATTN: Records Officer 1101 Wootton Parkway, Plaza Level, Suite 100 Rockville, MD 20852
3	Commander, Personnel Service Center (PSD-MR) MS7200 US Coast Guard 4200 Wilson Blvd., Suite 1100 Arlington, VA 29598-7200 http://uscg.mil/psc/adm	8	<i>Reserved.</i>	13	<i>Reserved.</i>
4	Headquarters U.S. Marine Corps Manpower Management Support Branch (MMSB-10) 2008 Elliot Road Quantico, VA 22134-5030	9	<i>Reserved.</i>	14	National Personnel Records Center (Military Personnel Records) 1 Archives Dr. St. Louis, MO 63138-1002 eVetRecs! http://www.archives.gov/veterans/military-service-records/
5	Marine Forces Reserve 4400 Dauphine St. New Orleans, LA 70146-5400	10	Navy Personnel Command (PERS-312E) 5720 Integrity Drive Millington, TN 38055-3120		

Appendix N: Form: Application for Search of Census Records (Census Records)
English and Spanish

For the latest version of this form, please visit: <http://www.maldef.org>



APPLICATION FOR SEARCH OF CENSUS RECORDS

IMPORTANT INFORMATION

PLEASE READ AND FOLLOW CAREFULLY

This application is for use in requesting a search of census records.* Copies of these census records often are accepted as evidence of age, citizenship, and place of birth for employment, social security benefits, insurance, and other purposes.

If the applicant is located, an official transcript will be provided including the following information:

Personal Census Information	Available for census year(s)
• Census year	1910–2010
• County where taken	1910–1980
• State where taken	1910–2010
• Name	1910–2010
• Relationship to head of household	1910–2010
• Name of person in whose household you were counted	1910–2010
• Age at the time of the census	1910–1950, 1970–2010
• Date of birth	
Year and quarter	1960
Month and year	1970–1980
Year	1990
Month/day/year	2000–2010
• Place of birth	1910–1950
• Citizenship if requested or if foreign born	1910–1950
• Occupation (if requested)	1910–1950

The U.S. Census Bureau's records are arranged according to the address at the time of the census. Censuses are taken primarily for statistical, not legal, purposes. Attention is called to the possibility that the information shown in the census record may not agree with that given in your application. **The record must be copied exactly as it appears on the census form.** The U.S. Census Bureau CANNOT make changes even though it realizes that enumerators may have been misinformed or made mistakes in writing down the data they collected. Those agencies that accept census transcripts as evidence of age, relationship, or place of birth usually overlook minor spelling differences but would be reluctant to consider a record that was changed years later at an applicant's request.

If you authorize the U.S. Census Bureau to send your record to someone other than yourself, you must provide the name and address, including ZIP Code, of the other person/agency.

Birth certificates, including delayed birth certificates, are **not issued** by the U.S. Census Bureau. You can obtain the birth certificate from the Health Department or the Department of Vital Statistics of the state in which the applicant was born.

The average time it should take you to fill out the BC-600, "Application for Search of Census Records", including the time spent reading instructions is 12 minutes.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Paperwork Project 0607–0117, U.S. Census Bureau, 4600 Silver Hill Road, AMSD-3K138, Washington, D.C. 20233-1500. You may e-mail comments to Paperwork@census.gov; use "Paperwork Project 0607-0117" as the subject.

Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget. This 8-digit number appears in the top right corner of page 3 of this form.

* Information from 1940 and earlier censuses is public information and is available from the National Archives.

The completed application should be mailed to the U.S. Census Bureau, P.O. Box 1545, Jeffersonville, IN 47131, together with a money order or check payable to "Commerce–Census."

INSTRUCTIONS FOR COMPLETING THIS FORM
PRINT OR TYPE INFORMATION EXCEPT SIGNATURE
PLEASE FOLLOW NUMBERED INSTRUCTIONS

1. Purpose

The purpose for which the information is desired must be shown so that a determination may be made under 13 U.S.C. 8(a) that the record is required for proper use. For proof of age, most agencies require documents closest to date of birth; therefore we suggest you complete information for the **EARLIEST CENSUS AFTER DATE OF BIRTH**.

2. Signature

Each application requires a signature. The signature should be the same as that shown on the line captioned "full name of person whose census record is requested." When the application is for a census record concerning another person, the requester must sign the application, and the authority of the requester must be furnished as stated in instruction 3 below. If signed by marking (X), please indicate the name of the person whose mark it is and have witnesses sign as instructed. IF SIGNATURE IS PRINTED, please indicate that is the usual signature.

3. Confidential information given to other than person to whom it relates

- (a) Census information is confidential and ordinarily will not be furnished to another person unless the person to whom it relates authorizes this in the space provided or if there is other proper authorization as indicated in 3(b), 3(c), and 3(d).
- (b) Minor children – Information regarding a child who has at this time not reached the legal age of 18 may be obtained upon the written request of either parent or guardian.
- (c) Mentally incompetent persons – Information regarding persons who are mentally incompetent may be obtained upon the written request of the legal representative, supported by a certified copy of the court order naming such legal representative.

- (d) **Deceased persons – If the record requested relates to a deceased person, the application MUST be signed by (1) a blood relative in the immediate family (parent, brother, sister, or child), (2) the surviving wife or husband, (3) the administrator or executor of the estate, or (4) a beneficiary by will, or insurance. IN ALL CASES INVOLVING DECEASED PERSONS, a certified copy of the death certificate MUST be furnished, and the relationship to the deceased MUST be stated on the application. Legal representatives MUST also furnish a certified copy of the court order naming such legal representatives; and beneficiaries MUST furnish legal evidence of such beneficiary interest.**

4. Fee required

The \$65.00 fee is for a search of one census for one person only. The time required to complete a search depends upon the number of cases on hand at the particular time and the difficulty encountered in searching a particular case. The normal

processing time is 3 to 4 weeks. The fee covers return postage of your search results by regular mail. You do not need to include a return envelope for normal processing. For an additional fee of \$20 the search can be completed in one business day after we receive it. If you want your search results returned to you by express mail you must include a self-addressed, prepaid express mail envelope with your application. You may also submit your application by express mail for faster service.

No more than one census will be searched and the results furnished for one fee. Should it be necessary to search more than one census to find the record, you will be notified to send another fee before another search is made. Tax monies are not available to furnish the information. **If a search has been made, the fee cannot be returned even if the information is not found.**

5. Full schedules

The full schedule is the complete one-line entry of personal data recorded for that individual ONLY. The names of other persons will not be listed. If the applicant specifies "full schedule," the Census Bureau will furnish, in addition to the regular transcript, whatever other information appears on the named person's record in the original schedule, but only for THAT PERSON. In this case the information is typed on a facsimile of the original census schedule and verified as a true copy. There is an additional charge of \$10.00 for EACH full schedule requested.

The Census Bureau also will provide "full schedule" information for those other members of the same household for whom authorizations are furnished. (See Instruction 3 for authorization requirements). A fee of \$10.00 is required for each person listed on the full schedule.

LIMITATIONS – Certain information, such as place of birth, citizenship, and occupation, is available only for census years 1910 through 1950. Full schedule information is not available for census years 1970, 1980, 1990, 2000, and 2010.

6. Census years 1910–1920–1930–1940–1950–

1960–1970–1980–1990–2000–2010

The potential of finding an individual's census record is increased when the respondent provides thorough and accurate address information FOR THE DAY THESE CENSUSES WERE TAKEN. If residing in a city AT THE TIME THESE CENSUSES WERE TAKEN, it is necessary to furnish the house number, the name of the street, city, county, state, and the name of the parent or other head of household with whom residing at the time of the census. If residing in a rural area, it is VERY IMPORTANT to furnish the township, district, precinct or beat, AND the direction and number of miles from the nearest town.

1990, 2000, and 2010 Request – It is VERY IMPORTANT to provide a house number and street name or rural route and box number. Always include a ZIP Code.

7. Locator Map (optional)

Box 7 is provided for a sketch of the area where the applicant lived at the time of the requested census.

**IF YOU NEED HELP FILLING OUT THIS APPLICATION,
PLEASE CALL 812-218-3046, MONDAY THROUGH FRIDAY
7:00 A.M. THROUGH 4:30 P.M. EASTERN TIME**

FORM **BC-600**
(4-10-2013)U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU**APPLICATION FOR SEARCH OF CENSUS RECORDS**

RETURN TO: U.S. Census Bureau, P.O. Box 1545, Jeffersonville, IN 47131

NAME OF
APPLICANT**1. Purpose for which record is to be used (See Instruction 1)**☐ Passport
(date required) _____☐ Proof of age☐ Genealogy☐ Other – *Please specify*

I certify that information furnished about anyone other than the applicant will not be used to the detriment of such person or persons by me or by anyone else with my permission.

2. Signature – Do not print (Read instruction 2 carefully before signing)PRESENT
MAILING
ADDRESS

Number and street

City

State

ZIP Code

Telephone number (Include area code)

IF SIGNED BY MARK (X), TWO WITNESSES MUST SIGN HERE

Signature

Signature

NOTICE – Intentionally falsifying this application may result in a fine of up to \$250,000 or up to 5 years of imprisonment, or both (title 18, U.S. Code, section 1001).FULL NAME OF
PERSON WHOSE
CENSUS RECORD
IS REQUESTED

First name

Middle name

Maiden name (If any)

Present last name

Nicknames

Date of birth (If unknown, estimate)

Place of birth (City, county, State)

Race

Sex

Full name of father (Stepfather, guardian, etc.)

Nicknames

Full maiden name of mother (Stepmother, etc.)

Nicknames

First marriage (Name of husband or wife of applicant)

Year married (Approximate)

Second marriage (Name of husband or wife of applicant)

Year married (Approximate)

Names of brothers and sisters

Name and relationship of all other persons living in household (Aunts, uncles, grandparents, lodgers, etc.)

DO NOT USE THIS SPACE – OFFICIAL USE ONLY

\$ _____ (Fee)

☐ Money Order☐ Check☐ Other

Case number

Papers received (itemize)

Returned

Received by

Date

Returned by

Date

3. If the census information is to be sent to someone other than the person whose record is requested, give the name and address, including ZIP Code, of the other person or agency.

This authorizes the U.S. Census Bureau to send the record to: (See instruction 3)

FEE REQUIRED: (See instructions 4 and 5)**4. A check or money order (DO NOT SEND CASH) payable to "Commerce-Census" must be sent with the application. Checks will be processed by electronic fund transfer. This fee covers the cost of a search of no more than one census year for one person only.****5. Fee required \$ 65.00**____ extra copies @ **\$2.00** \$ _________ full schedules @ **\$10.00** \$ _________ expedited fee @ **\$20.00** \$ _____**TOTAL amount enclosed** \$ _____

6. GIVE PLACE OF RESIDENCE FOR APPROPRIATE CENSUS DATE (SEE INSTRUCTIONS 1 AND 6)

Census date	Number and street (Read instruction 6 first)	City, town, township (Read instruction 6 first)	County and State	Name of person with whom living (Head of household)	Relationship of head of household
April 15, 1910 (See instruction 6)					
Jan. 1, 1920 (See instruction 6)					
April 1, 1930 (See instruction 6)					
April 1, 1940 (See instruction 6)					
April 1, 1950 (See instruction 6)					
April 1, 1960 (See instruction 6)					
April 1, 1970 (See instruction 6)					
April 1, 1980 (See instruction 6)					
April 1, 1990 (See instruction 6)		ZIP Code			
April 1, 2000 (See instruction 6)		ZIP Code			
April 1, 2010 (See instruction 6)		ZIP Code			

7. LOCATOR MAP (Optional)

PLEASE DRAW A MAP OF WHERE THE APPLICANT LIVED, SHOWING ANY PHYSICAL FEATURES, LANDMARKS, INTERSECTING ROADS, CLOSEST TOWNS, ETC., THAT MAY AID IN LOCATING THE APPLICANT FOR THE CENSUS YEAR REQUESTED.

HAVE YOU SIGNED THE APPLICATION AND ENCLOSED THE CORRECT FEES?



SOLICITUD PARA BUSQUEDA DE REGISTROS CENSALES

INFORMACION IMPORTANTE

LEA Y SIGA DETENIDAMENTE

La solicitud al dorso de esta hoja se debe usar para pedir una búsqueda de registros censales.* Las copias de estos registros censales a menudo se aceptan como pruebas de edad, ciudadanía y lugar de nacimiento para obtener empleo, beneficios de Seguro Social, seguro y otros fines.

Si se encuentra al solicitante, se proveerá una copia oficial con la siguiente información:

Información censal personal	Disponible para los años censales
& Año censal	1910–2010
& Condado donde se realizó	1910–1980
& Estado donde se realizó	1910–2010
& Nombre	1910–2010
& Parentesco con jefe de familia	1910–2010
& Nombre de la persona en cuya vivienda se enumeró al solicitante	1910–2010
& Edad al momento del censo	1910–1950, 1970–2010
& Fecha de nacimiento	1960
Año y trimestre	1970–1980
Mes y año	1990
Año	2000–2010
Mes/día/año	1910–1950
& Lugar de nacimiento	1910–1950
& Ciudadanía si se solicita o si nació en el extranjero	1910–1950
& Ocupación (si se solicita)	1910–1950

La solicitud completada debe enviarse por correo a U.S. Census Bureau, P.O. Box 1545, Jeffersonville, IN 47131, junto con un giro o cheque pagadero a "Commerce&Census".

* La información de los censos de 1940 y anteriores es información pública y está disponible en los Archivos Nacionales.

Los registros de la Oficina del Censo de los EE.UU. están ordenados según el domicilio al momento del censo. Los censos se realizan principalmente por motivos estadísticos, no legales. Se debe tener en cuenta que existe la posibilidad de que la información que muestra el registro del censo no coincida con la información de su solicitud. El registro debe copiarse exactamente como aparece en el formulario del censo. La Oficina del Censo de los EE.UU. **NO PUEDE** hacer cambios aun cuando se dé cuenta de que los enumeradores pueden haber estado mal informados o pueden haber cometido un error al escribir los datos que recopilaron. Las agencias que aceptan copias del censo como prueba de edad, filiación o lugar de nacimiento generalmente pasan por alto las pequeñas diferencias de ortografía, pero estarían poco dispuestas a considerar un registro que se modificó años después a pedido de un solicitante.

Si usted autoriza a la Oficina del Censo de los EE.UU. a enviar su registro a alguien que no es usted, debe proporcionar el nombre y la dirección, con código postal, de la persona o la agencia.

Los certificados de nacimiento, incluso los certificados de nacimiento atrasados, no son expedidos por la Oficina del Censo de los EE.UU. Puede obtener el certificado de nacimiento en el Departamento de Salud o en el Registro Demográfico (Civil) del estado donde nació el solicitante.

El tiempo promedio necesario para completar el formulario BC-600 "Solicitud para búsqueda de registros censales", incluso el tiempo que toma leer las instrucciones, es de 12 minutos.

Envíe comentarios con respecto a este estimado de tiempo o cualquier otro aspecto de esta recopilación de información, incluso sugerencias para reducir el tiempo que toma contestar, a: Paperwork Project 0607–0117, U.S. Census Bureau, 4600 Silver Hill Road, AMSD-3K138, Washington, D.C. 20233. Puede enviar sus comentarios por correo electrónico a Paperwork@census.gov con el asunto "Paperwork Project 0607-0117".

Las personas no tienen la obligación de responder a una recopilación de información a menos que ésta exhiba un número de aprobación válido otorgado por la Oficina de Administración y Presupuesto. Este número de ocho dígitos aparece en el extremo superior derecho de la página 3 de este formulario.

**INSTRUCCIONES PARA COMPLETAR ESTE FORMULARIO
COMPLETE EN LETRA DE MOLDE O A MÁQUINA EXCEPTO LA FIRMA
SIGA LAS INSTRUCCIONES NUMERADAS**

DETACH HERE

1. Propósito

El propósito para el cual se desea la información debe explicarse para que se pueda determinar que el registro se solicita para un fin adecuado, según lo requiere la sección 8(a) del título 13 del Código de los EE.UU. Como prueba de edad, la mayoría de las agencias requieren documentos cercanos a la fecha de nacimiento, por lo tanto, sugerimos completar la información para el PRIMER CENSO DESPUÉS DE LA FECHA DE NACIMIENTO.

2. Firma

Cada solicitud debe llevar una firma. La firma debe ser la misma que se muestra en la línea que dice "nombre completo de la persona cuyo registro censal se solicita". Cuando la solicitud es para un registro censal de otra persona, el solicitante debe firmar la solicitud, y la autoridad del solicitante debe estar conferida según se establece en la instrucción 3 a continuación. Si se firma con una (X), indique el nombre de la persona que firmó con la (X) y tenga testigos para que firmen según las instrucciones. Si LA FIRMA SE ESCRIBE EN LETRA DE MOLDE, indique que es la firma habitual.

3. Entrega de información confidencial a personas a las cuales no se refiere dicha información

- (a) La información censal es confidencial y por lo general no se proporciona a otras personas, a menos que la persona a quien se refiere la información lo autorice en el espacio provisto o que exista otra autorización apropiada según se establece en 3(b), 3(c) y 3(d).
- (b) Niños menores de edad. La información sobre un niño que en este momento no ha cumplido la edad legal de 18 años puede obtenerse con una solicitud por escrito firmada por uno de los padres o el tutor legal.
- (c) Personas incapacitadas mentalmente. Se puede obtener información sobre personas incapacitadas mentalmente si el representante legal la solicita por escrito, junto con una copia certificada de la orden judicial que nombra a dicho representante legal.

(d) Personas fallecidas – Si el registro se refiere a una persona fallecida, la solicitud DEBE estar firmada por (1) un familiar consanguíneo (padre, hermano, hermana o hijo), (2) el esposo o la esposa sobreviviente, (3) el administrador testamentario o albacea o (4) un beneficiario por testamento o seguro de vida. EN TODOS LOS CASOS CONCERNIENTES A PERSONAS FALLECIDAS, la solicitud DEBE ir acompañada de la partida de defunción y DEBE indicar el parentesco que tiene con el difunto. Los representantes legales también deben presentar una copia certificada de la orden judicial que los nombre como tales, y los beneficiarios deben presentar una prueba legal de su interés como beneficiarios.

4. Pago requerido

El pago de \$65,00 es para cubrir el costo de una búsqueda de un censo para una persona únicamente. El tiempo necesario para realizar una búsqueda depende del número de casos que tengamos pendientes y la dificultad para buscar un caso específico. El tiempo normal de procesamiento es de 3 a 4 semanas. El pago cubre el franqueo para enviar por correo normal los resultados de la búsqueda. No necesita incluir un sobre con sello para el procesamiento normal. Por un pago adicional de \$20, la búsqueda puede completarse en un día hábil a partir del momento en que recibimos la solicitud.

Si desea que los resultados le lleguen por correo expreso, debe incluir un sobre de correo expreso con franqueo prepago, con su nombre y dirección, junto con su solicitud. También puede enviar su solicitud por correo expreso si desea recibir un servicio más rápido.

Sólo se buscará en un censo y se proveerán los resultados por un solo pago. En caso de que sea necesaria una búsqueda en más de un censo para encontrar el registro, se le notificará para que envíe otro pago antes de realizar la búsqueda adicional. No puede utilizarse dinero de los impuestos para suministrar la información.

Una vez realizada una búsqueda, el pago no puede devolverse aun cuando la información no se haya encontrado.

5. Planillas completas

La planilla completa es la entrada completa de una línea que contiene datos personales registrados para ese individuo ÚNICAMENTE. No se incluirán nombres de otras personas. Si el solicitante especifica "planilla completa", la Oficina del Censo suministrará, además de la copia habitual, toda información extra que aparezca en el registro de la persona mencionada en la planilla original, pero únicamente para ESA PERSONA. En este caso la información se escribe en un facsímil de la planilla del censo original y se autentifica como copia fiel. Hay un cargo adicional de \$10,00 por CADA planilla completa que se solicite.

La Oficina del Censo también suministrará información de la "planilla completa" para los integrantes del mismo hogar para quienes se confieren las autorizaciones. (Vea la Instrucción 3 para las condiciones de autorización). Se requiere un pago de \$10,00 para cada persona mencionada en la planilla completa.

LIMITACIONES. Cierta información, como el lugar de nacimiento, ciudadanía y ocupación, está disponible sólo para los años censales 1910 a 1950. No hay información de planilla completa para los años censales 1970, 1980, 1990, 2000 y 2010.

6. Años censales 1910–1920–1930–1940–1950–1960–1970–1980–1990–2000–2010

Existe mayor posibilidad de encontrar registros censales individuales cuando el respondedor provee una dirección completa y exacta CORRESPONDIENTE AL DÍA EN QUE SE REALIZARON LOS CENSOS. Si residía en una ciudad AL MOMENTO DE REALIZARSE LOS CENSOS, es necesario indicar el número de la casa, el nombre de la calle, ciudad, condado, estado y el nombre del padre u otro jefe de hogar con quien residía al momento del censo. Si residía en una zona rural, es MUY IMPORTANTE indicar la municipalidad, distrito, precinto o área y la ubicación y cantidad de millas con respecto al pueblo más cercano.

Solicitud para 1990, 2000 y 2010. Es MUY IMPORTANTE indicar un número de casa y nombre de calle o ruta rural y número de buzón. Siempre incluya el código postal.

7. Mapa localizador (opcional)

El cuadro 7 provee un espacio para dibujar la zona donde el solicitante vivía al momento del censo que solicita.

SI NECESITA AYUDA PARA COMPLETAR ESTA SOLICITUD, LLAME AL 812-218-3046, DE LUNES A VIERNES DE 7:00 A.M. A 4:30 P.M., HORA DEL ESTE

DO NOT RETURN WITH APPLICATION

DETACH HERE

FORM **BC-600(SP)**
(4-10-2013)U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU**SOLICITUD PARA BÚSQUEDA DE REGISTROS CENSALES**

DEVUELVA A: U.S. Census Bureau, P.O. Box 1545, Jeffersonville, IN 47131

**NOMBRE DEL
SOLICITANTE****1. Propósito para el cual se utilizará el registro (Vea la instrucción 1)**☐ Pasaporte
(incluya fecha) _____☐ Prueba de edad☐ Genealogía☐ Otros & *Especifique* _____

Certifico que la información suministrada sobre otra persona que no sea el solicitante no se utilizará en detrimento de dicha persona ya sea por mí o por cualquier otra persona con mi permiso.

2. Firma & No escriba en letra de molde (Lea la instrucción 2 detenidamente antes de firmar)**DIRECCIÓN
POSTAL
ACTUAL**

Número y calle

Ciudad

Estado

Código postal

Número de teléfono (con código de área)

SI FIRMA CON UNA (X), DEBEN FIRMAR DOS TESTIGOS A CONTINUACIÓN

Firma

Firma

AVISO. La falsificación intencional de esta solicitud puede resultar en una multa de hasta \$250,000 o en hasta 5 años de prisión, o ambos (sección 1001 del título 18 del Código de los EE.UU.).

**NOMBRE COMPLETO
DE LA PERSONA CUYO
REGISTRO CENSAL
SE SOLICITA**

Nombre

Segundo nombre

Apellido de soltera (*si corresponde*)

Apellido actual

Apodos

Fecha de nacimiento (*si se desconoce, fecha estimada*)

Lugar de nacimiento (ciudad, condado, estado)

Raza

Sexo

Nombre y apellido del padre (*padraastro, tutor, etc.*)

Apodos

Nombre y apellido de soltera de la madre (*madrastra, etc.*)

Apodos

Primer matrimonio (*Nombre del esposo o esposa del solicitante*)

Fecha de matrimonio

Segundo matrimonio (*Nombre del esposo o esposa del solicitante*)Fecha de matrimonio (*aproximada*)

Nombres de hermanos y hermanas

Nombre y parentesco de todas las demás personas que viven en el mismo hogar (*tíos, abuelos, inquilinos, etc.*)**NO UTILICE ESTE ESPACIO, USO OFICIAL SOLAMENTE**

\$ _____ (Fee)

☐ Money Order☐ Check☐ Other

Case number

Papers received (itemize)

Returned

Received by

Date

Returned by

Date

3. Si la información censal se va a enviar a una persona distinta de la persona cuyo registro se solicita, indique el nombre y dirección, con código postal, de esta otra persona o agencia.Esto autoriza a la Oficina del Censo de los EE.UU. a enviar el registro a: (*Vea la instrucción 3*)**PAGO REQUERIDO:** (*Vea las instrucciones 4 y 5*)**4. Con la solicitud debe enviar un cheque o giro postal (NO ENVIE DINERO EN EFECTIVO)** pagadero a "Commerce & Census". Cheques serán procesados por transferencia de fondos electrónicos. Este pago cubre el costo de una búsqueda de no más de un año censal para una persona únicamente.**5. Pago requerido \$ 65.00**

____ copias extras a @ \$2.00 \$ _____

____ planillas completas a @ \$10.00 \$ _____

____ trámite acelerado a @ \$20.00 \$ _____

Pago TOTAL adjunto \$ _____**POR FAVOR, COMPLETE EL DORSO DE ESTA HOJA**

6. INDIQUE EL LUGAR DE RESIDENCIA PARA LA FECHA DEL CENSO CORRESPONDIENTE (VEA LAS INSTRUCCIONES 1 Y 6)					
Fecha del censo	Número y calle (Lea la instrucción 6 primero)	Ciudad, pueblo, municipalidad (Lea la instrucción 6 primero)	Condado y Estado	Nombre de la persona con quien se compartía la vivienda (Jefe de hogar)	Parentesco con el jefe de hogar
15 de abril de 1910 (Vea la instrucción 6)					
1 de enero de 1920 (Vea la instrucción 6)					
1 de abril de 1930 (Vea la instrucción 6)					
1 de abril de 1940 (Vea la instrucción 6)					
1 de abril de 1950 (Vea la instrucción 6)					
1 de abril de 1960 (Vea la instrucción 6)					
1 de abril de 1970 (Vea la instrucción 6)					
1 de abril de 1980 (Vea la instrucción 6)					
1 de abril de 1990 (Vea la instrucción 6)		Código postal			
1 de abril de 2000 (Vea la instrucción 6)		Código postal			
1 de abril de 2010 (Vea la instrucción 6)		Código postal			
7. MAPA LOCALIZADOR (Opcional) DIBUJE UN MAPA DEL LUGAR DONDE VIVÍA EL SOLICITANTE, QUE MUESTRE LOS RASGOS FÍSICOS, REFERENCIAS, CRUCES DE CARRETERAS, PUEBLOS MÁS CERCANOS, ETC., QUE PUEDAN AYUDAR A ENCONTRAR AL SOLICITANTE PARA EL AÑO CENSAL QUE SE INDICA.					
¿FIRMÓ LA SOLICITUD E INCLUYÓ EL PAGO CORRECTO?					

Appendix O: Form: DHS Freedom of Information/Privacy Act Request Form G-639 Form &
Instructions (Immigration Records)

For the latest version of this form, please visit: <http://www.maldef.org>



Freedom of Information/Privacy Act Request

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form G-639
OMB No. 1615-0102
Expires 03/31/2017

NOTE: Use of this request is optional. Any written format for a Freedom of Information or Privacy Act request is acceptable.

► **START HERE - Type or print in black ink.**

Part 1. Type of Request

Select **only one** box.

NOTE: If you are filing this request on behalf of another individual, respond as it would apply to that individual.

- 1.a. ☐ Freedom of Information Act (FOIA)
1.b. ☐ Privacy Act (PA)
1.c. ☐ Amendment of Record (PA only)

Part 2. Requestor Information

1. Are you the Subject of Record for this request?
☐ Yes ☐ No

If you answered "No" to **Item Number 1.**, provide the information requested in **Part 2.** If you answered "Yes" to **Item Number 1.**, skip to **Part 3.**

Requestor's Full Name

- 2.a. Family Name (Last Name)
2.b. Given Name (First Name)
2.c. Middle Name

Requestor's Mailing Address

- 3.a. In Care Of Name (if any)
3.b. Street Number and Name
3.c. ☐ Apt. ☐ Ste. ☐ Flr.
3.d. City or Town
3.e. State 3.f. ZIP Code
3.g. Province
3.h. Postal Code
3.i. Country

Requestor's Contact Information

4. Requestor's Daytime Telephone Number
5. Requestor's Mobile Telephone Number (if any)
6. Requestor's Email Address (if any)

Requestor's Certification

By my signature, I consent to pay all costs incurred for search, duplication, and review of documents up to **\$25.** (See Form G-639 Instructions for more information.)

- 7.a. Requestor's Signature
7.b. Date of Signature (mm/dd/yyyy)

Part 3. Description of Records Requested

NOTE: While you are not required to respond to every item in **Part 3.**, failure to provide complete and specific information may delay processing of your request or create an inability for U.S. Citizenship and Immigration Services (USCIS) to locate the records or information requested.

1. **Purpose (Optional):** You are not required to state the purpose of your request. However, providing this information may assist USCIS in locating the records needed to respond to your request.)

Full Name of the Subject of Record

- 2.a. Family Name (Last Name)
2.b. Given Name (First Name)
2.c. Middle Name

Part 3. Description of Records Requested
(continued)

Other Names Used by the Subject of Record (include nicknames, aliases, and maiden name, if applicable)

- 3.a. Family Name (Last Name)
- 3.b. Given Name (First Name)
- 3.c. Middle Name

Full Name of the Subject of Record at Time of Entry into the United States

- 4.a. Family Name (Last Name)
- 4.b. Given Name (First Name)
- 4.c. Middle Name

Other Information About the Subject of Record

5. Form I-94 Number Arrival-Departure Record
▶
6. Alien Registration Number (A-Number) (if any)
▶ A-
7. Application, Petition, or Request Receipt Number
▶

Information About Family Members that May Appear on Requested Records

For example, provide the requested information about a spouse or children. If you need extra space to complete this section, use the space provided in **Part 5. Additional Information**.

Family Member 1

- 8.a. Family Name (Last Name)
- 8.b. Given Name (First Name)
- 8.c. Middle Name
9. Relationship

Family Member 2

- 10.a. Family Name (Last Name)
- 10.b. Given Name (First Name)
- 10.c. Middle Name
11. Relationship

Parents' Names for the Subject of Record

Father

- 12.a. Family Name (Last Name)
- 12.b. Given Name (First Name)
- 12.c. Middle Name

Mother

- 13.a. Family Name (Last Name)
- 13.b. Given Name (First Name)
- 13.c. Middle Name
- 13.d. Maiden Name (if applicable)

Part 4. Verification of Identity and Subject of Record Consent

NOTE: The information requested in **Part 4** is **REQUIRED**. Complete all applicable **Item Numbers**. In addition, the Subject of Record **MUST** sign **Part 4** of this request.

Full Name of the Subject of Record

- 1.a. Family Name (Last Name)
- 1.b. Given Name (First Name)
- 1.c. Middle Name

Part 4. Verification of Identity and Subject of Record Consent (continued)

Mailing Address for the Subject of Record

- 2.a. In Care Of Name (if any)
- 2.b. Street Number and Name
- 2.c. ☐ Apt. ☐ Ste. ☐ Flr.
- 2.d. City or Town
- 2.e. State 2.f. ZIP Code
- 2.g. Province
- 2.h. Postal Code
- 2.i. Country

Other Information for the Subject of Record

3. Date of Birth (mm/dd/yyyy)
4. Country of Birth

Contact Information for the Subject of Record

Providing this information is **optional**.

5. Daytime Telephone Number
6. Mobile Telephone Number (if any)
7. Email Address (if any)

Signature and Notarized Affidavit or Declaration of the Subject of Record

Select **only one** box.

NOTE: The Subject of Record **MUST** provide a signature in **Item Number 8.a.** Notarized Affidavit of Identity **OR** **Item Number 8.b.** Sworn Declaration Under Penalty of Perjury. If the Subject of Record is deceased, read **Item Number 8.c.** and attach proof of death.

- 8.a. ☐ **Notarized Affidavit of Identity** (Do **NOT** sign and date below until the notary public provides instructions to you.)

By my signature, I consent to USCIS releasing the requested records to the requestor (if applicable) named in **Part 2**. I also consent to pay all costs incurred for search, duplication, and review of documents up to **\$25** (if filing this request for myself).

Signature of Subject of Record

Date of Signature (mm/dd/yyyy)

Subscribed and sworn to before me on this _____
day of _____ in the year _____.
Daytime Telephone Number _____

Signature of Notary

My Commission Expires on _____

- 8.b. ☐ **Declaration Under Penalty of Perjury**

By my signature, I consent to USCIS releasing the requested records to the requestor (if applicable) named in **Part 2**. I also consent to pay all costs incurred for search, duplication, and review of documents up to **\$25** (if filing this request for myself).

I certify, swear, or affirm, under penalty of perjury under the laws of the United States of America, that the information in this request is complete, true, and correct.

Signature of Subject of Record

Date of Signature (mm/dd/yyyy)

- 8.c. **Deceased Subject of Record** (**NOTE:** You **MUST** attach an obituary, death certificate, or other proof of death.)

Part 5. Additional Information

If you need extra space to provide any additional information within this request, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with your request or attach a separate sheet of paper. Type or print the name of the Subject of Record and his or her A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which the information refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. Alien Registration Number (A-Number) (if any)

▶ A-

3.a. Page Number 3.b. Part Number 3.c. Item Number

3.d.

4.a. Page Number 4.b. Part Number 4.c. Item Number

4.d.

5.a. Page Number 5.b. Part Number 5.c. Item Number

5.d.

6.a. Page Number 6.b. Part Number 6.c. Item Number

6.d.



Instructions for Freedom of Information/Privacy Act Request

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form G-639
OMB No. 1615-0102
Expires 03/31/2017

What is the Purpose of This Request?

Use this request to obtain access to U. S. Citizenship and Immigration Services (USCIS) records as allowed by the Freedom of Information Act (FOIA) at 5 U.S.C. 552 and the Privacy Act of 1974 (PA) at 5 U.S.C. 552a.

With certain exceptions, FOIA provides access to Federal agency records. PA permits U.S. citizens or lawful permanent residents to gain access to information pertaining to themselves in Federal agency records; to have a copy made of all or any part thereof; to correct or amend such records; and to permit individuals to make requests concerning what records pertaining to themselves are collected, maintained, used, or disseminated. PA also prohibits disclosure of any person's records without his or her written consent, except under certain circumstances as prescribed by PA.

When May I Use This Request?

An individual may use this request to obtain access to agency records or to access his or her own records, or he or she may consent to another individual requesting access to those records.

Do not use Form G-639 for the following requests:

1. For status inquiries. Contact the USCIS office where the application, petition, or request was filed or call our National Customer Service Center at **1-800-375-5283**;
2. For consular notification of a visa petition approval. Use Form I-824, Application for Action on an Approved Application or Petition;
3. To request the return of original documents. Use Form G-884, Request for Return of Original Documents;
4. To request records of naturalization prior to September 27, 1906. Contact the clerk of court where the naturalization occurred;
5. To request information on USCIS manifest arrivals prior to December 1982. Contact the National Archives; and
6. To obtain proof of status (for example, Social Security benefit, Selective Service requirement).

NOTE: Form G-639 is not required to make a FOIA/PA request; however, you must make all FOIA/PA requests in writing.

General Instructions

USCIS provides forms free of charge through the USCIS Web site. In order to view, print, or fill out our forms, you should use the latest version of Adobe Reader, which you can download for free at <http://get.adobe.com/reader/>. If you do not have Internet access, you may call the USCIS National Customer Service Center at **1-800-375-5283** and ask that we mail a form to you. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

Signature. Each request must be properly signed and filed. For all signatures on this request, USCIS will not accept a stamped or typewritten name in place of a signature. If you are under 14 years of age, your parent or legal guardian may sign the request on your behalf. A legal guardian may also sign for a mentally incompetent person.

Filing Fee. No filing fee is required until you are notified by USCIS during processing of your request. (See the **What Is the Filing Fee** section of these instructions.)

Evidence. At the time of filing, you must submit all evidence and supporting documentation listed in the **Specific Instructions** section of these instructions.

Copies. You may submit legible photocopies of documents requested, unless the instructions specifically state that you must submit an original document. USCIS may request an original document at the time of filing or at any time during processing of an application, petition, or request. If you submit original documents when not required, the documents may remain a part of the record, and USCIS will not automatically return them to you.

Translations. If you submit a document with information in a foreign language, you must also submit a full English translation. The translator must sign a certification that the English language translation is complete and accurate, and that he or she is competent to translate from the foreign language into English.

How To Fill Out Form G-639

1. Type or print legibly in black ink.
2. If you need extra space to complete any item within this request, use the space provided in **Part 5. Additional Information** or attach a separate sheet of paper; type or print your name and Alien Registration Number (A-Number) (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.
3. Answer all questions fully and accurately. If a question does not apply to you (for example, if you have never been married and the question asks “Provide the name of your current spouse”), type or print “N/A,” unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, “How many children do you have” or “How many times have you departed the United States”), type or print “None,” unless otherwise directed.

Specific Instructions

Form G-639 is divided into five parts. The following information will help you complete the request.

NOTE: Providing the information requested on this request is voluntary. However, failure to provide complete and specific information may delay processing of your request or create an inability for USCIS to locate the records or information requested.

Part 1. Type of Request

Item Numbers 1.a. - 1.c. Select **only one** box in **Part 1.** that describes the type of records you are requesting.

NOTE: If you are filing this request on behalf of another individual, select the response as it would apply to that individual.

Part 2. Requestor Information

Item Number 1. Select the appropriate box to indicate whether you are the Subject of Record. If you answer “No,” indicating you are requesting access to another individual’s records, complete all information in **Part 2.** If you answer “Yes,” indicating you are requesting access to your own records, skip **Part 2.** and proceed to **Part 3. Description of Records Requested.**

Item Numbers 2.a. - 2.c. Requestor’s Full Name. Provide your full legal name in the spaces provided.

Item Numbers 3.a. - 3.i. Requestor’s Mailing Address. List your complete mailing address in the spaces provided. You may list a valid residence, APO, In Care Of Name, or commercial address in the United States. You may list a Post Office address (PO Box) if that is how you receive your mail. If your mail is sent to someone other than yourself, include an “In Care Of Name” as part of your mailing address. If your mailing address is in a U.S. territory and it contains an urbanization name, list the urbanization name in the “In Care Of Name” space provided.

Item Numbers 4. - 6. Requestor's Contact Information. Provide your daytime telephone number, mobile telephone number (if any), and email address (if any).

Item Numbers 7.a. - 7.b. Requestor's Certification. Sign and date the request. A stamped or typewritten name in place of a signature is not acceptable.

Part 3. Description of Records Requested

You are not required to respond to every item in **Part 3.**; however, failure to provide complete and specific information may delay processing of your request or create an inability for USCIS to locate the records or information requested.

NOTE: If you are filing this request on behalf of another individual, select the response as it would apply to that individual.

Item Number 1. Purpose. This optional information, if provided, may assist USCIS in locating the records you seek.

Item Numbers 2.a. - 2.c. Full Name of the Subject of Record. Provide the full legal name of the Subject of Record in the spaces provided.

Item Numbers 3.a. - 3.c. Other Names Used by the Subject of Record. Provide other names you have used since birth, including any nicknames, aliases, and your maiden name (if applicable). If you need extra space to complete this section, use the space provided in **Part 5. Additional Information.**

Item Numbers 4.a. - 4.c. Full Name of the Subject of Record at Time of Entry into the United States. If your name has changed since your entered the United States, provide the full name that you used at the time of entry into the United States.

Item Number 5. Form I-94 Number Arrival-Departure Record. If U.S. Customs and Border Protection (CBP) or USCIS issued you a Form I-94, Arrival-Departure Record, provide your Form I-94 number and date that your authorized period of stay expires or expired (as shown on Form I-94). The Form I-94 number also is known as the Departure Number on some versions of Form I-94.

NOTE: If you were admitted to the United States by CBP at an airport or seaport after April 30, 2013, you may have been issued an electronic Form I-94 by CBP, instead of a paper Form I-94. You may visit the CBP Web site at www.cbp.gov/i94 to obtain a paper version of an electronic Form I-94. CBP **does not** charge a fee for this service. Some travelers admitted to the United States at a land border, airport, or seaport, after April 30, 2013 with a passport or travel document, who were issued a paper Form I-94 by CBP, may also be able to obtain a replacement Form I-94 from the CBP Web site without charge. If your Form I-94 cannot be obtained from the CBP Web site, it may be obtained by filing Form I-102, Application for Replacement/Initial Nonimmigrant Arrival-Departure Record, with USCIS. USCIS **does** charge a fee for this service.

Item Number 6. Alien Registration Number (A-Number) (if any). An Alien Registration Number, otherwise known as an "A-Number," is typically issued to persons who apply for, or are granted, certain immigration benefits. In addition to USCIS, CBP, U.S. Immigration and Customs Enforcement (ICE), Executive Office for Immigration Review (EOIR), and the U.S. Department of State (DOS) may also issue an A-Number to certain aliens. If you were issued an A-Number, type or print it in the spaces provided. If you do not have an A-Number, or if you cannot remember it, leave this space blank.

Item Number 7. Application, Petition, or Request Receipt Number. Provide the USCIS receipt number that corresponds to any application, petition, or request you previously filed with USCIS.

Item Numbers 8.a. - 11. Information About Family Members that May Appear on Requested Records. Provide your family member's full name and his or her relationship to you for any individual that may appear on the requested records (for example, a spouse or children). If you need extra space to complete this section, use the space provided in **Part 5. Additional Information.**

Item Numbers 12.a. - 13.d. Parents' Names for the Subject of Record. Provide the full names of your father and mother in the spaces provided. If applicable, include your mother's maiden name.

Part 4. Verification of Identity and Subject of Record Consent

If you request records about yourself (in other words, you are the Subject of Record), you are required to verify your identity by providing your full name, your current address, your date of birth, and your place of birth in **Item Numbers 1.a. - 4.**, as requested in this section. You must also sign this request, and you must either have your signature notarized or submitted under penalty of perjury, which you can do by completing either **Item Number 8.a.** or **8.b.** in this section. If you request records about another individual (in other words, the other individual is the Subject of Record) and on behalf of that individual, you are still required to provide a statement from the individual verifying his or her identity, as well as certifying the individual's agreement that USCIS may release his or her records to you. Again, you can fulfill these requirements by completing **Item Numbers 1.a. - 4.** and then having the individual complete either **Item Number 8.a.** or **8.b.**

NOTE: If you are requesting records about another individual and your request is not on behalf of that individual, you may use the space provided in **Part 5. Additional Information** to provide additional information that you want USCIS to consider in processing your request. For example, if the Subject of Record is deceased, you may use this section to provide that information, and you should also attach appropriate proof of death, such as an obituary or a death certificate. If you believe that the disclosure of the Subject of Record's information would further a public interest recognizable under the FOIA, you may also use **Part 5. Additional Information** to assert and explain the public interest, and you should attach any documentation in support of your position.

Item Numbers 1.a. - 1.c. Full Name of the Subject of Record. Provide the full legal name of the Subject of Record in the spaces provided. If you are completing this request using a computer, this information will automatically complete based on your responses in **Item Numbers 2.a. - 2.c.** of **Part 3**.

Item Numbers 2.a. - 2.i. Mailing Address for the Subject of Record. Provide the current address of the Subject of Record in the spaces provided. You may list a valid residence, APO, In Care Of Name, or commercial address in the U.S. You may list a Post Office address (PO Box) if that is how the Subject of Record receives mail. If the mail is sent to someone other than the Subject of Record, include an "In Care Of Name" as part of the mailing address. If the mailing address is in a U.S. territory and it contains an urbanization name, list the urbanization name in the "In Care Of Name" space provided.

Item Number 3. Date of Birth. Provide the date of birth of the Subject of Record in mm/dd/yyyy format in the space provided.

Item Number 4. Country of Birth. Provide the name of the country where the Subject of Record was born. Provide the name of the country as it was named when the Subject of Record was born, even if the country's name has changed or the country no longer exists.

Item Numbers 5. - 7. Contact Information for the Subject of Record. Provide the daytime telephone number, mobile telephone number (if any), and email address (if any) for the Subject of Record. Providing this information is optional.

Item Numbers 8.a - 8.c. Signature and Notarized Affidavit or Declaration of the Subject of Record. Select only one box. The Subject of Record **MUST** provide a signature in **Item Number 8.a.** Notarized Affidavit of Identity **OR** **Item Number 8.b.** Declaration Under Penalty of Perjury, regardless if you submit this request yourself or another individual completes this request on your behalf. If the Subject of Record is deceased, read **Item Number 8.c.** and attach proof of death.

NOTE: Appropriate consent from the Subject of Record is established by submitting Form G-639 with required information and signatures or an authorizing letter with verification of identity for the Subject of Record. You may also use U.S. Department of Justice (DOJ) Form 361, Certification of Identity, to verify identity for the Subject of Record. Form DOJ-361 is available online at www.fbi.gov/foia/u.s.-department-of-justice-form-361-certification-of-identity. If you are a parent or legal guardian submitting Form G-639 on behalf of a child or other individual, you must also establish your own identity as the child's or other individual's parent or legal guardian.

Part 5. Additional Information

If you need extra space to provide any additional information within this request, use the space provided in **Part 5. Additional Information**. If you need more space than what is provided in **Part 5.**, you may make copies of **Part 5.** to complete and file with your request, or attach a separate sheet of paper. Include your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

Expedite Requests

Requests to have your Form G-639 expedited, or processed ahead of other previously received requests, are reviewed on a case-by-case basis. To seek expedited processing, you must submit a typed or printed statement explaining in detail the basis for requesting expedited processing, and your statement must include a certification that this information is complete, true, and correct to the best of your knowledge and belief.

You must establish that one of the following situations exists in order to receive expedited treatment of your FOIA/PA request:

1. Reasonably expected circumstances pose an imminent threat to the life or physical safety of an individual; or
2. There is an urgency to inform the public about an actual or alleged Federal government activity made by a person primarily engaged in disseminating information.

What is the Filing Fee?

No filing fee for Form G-639 is required until you are notified by USCIS during the processing of your request.

NOTE: When requested, the filing fee is not refundable, regardless of any action USCIS takes on this request. **DO NOT MAIL CASH.** You must submit all fees in the exact amounts.

Except for commercial requestors, the first 100 pages of reproduction and the first two hours of search time are provided without charge. Thereafter, requests processed under PA may incur fees of 10 cents per page for duplication. Other costs for searches and duplication are charged at the actual direct cost.

Fees are charged if the combined cost for searches, duplication, and/or review is more than \$14, and by submitting Form G-639, you agree to pay for fees up to \$25. If the total anticipated fees are more than \$250, or you have failed to pay fees in the past, USCIS may request an advance deposit. Also, USCIS will not process any Form G-639 until all unpaid fees from prior requests are paid.

Use the following guidelines when you prepare your checks or money orders for the Form G-639 filing fees:

1. The checks or money orders must be drawn on a bank or other financial institution located in the United States and must be payable in U.S. currency; **and**
2. Make the checks or money orders payable to **U.S. Department of Homeland Security**.

NOTE: Spell out U.S. Department of Homeland Security; do not use the initials “USDHS” or “DHS.”

Notice to Those Making Payment by Check. If you send us a check, USCIS will convert it into an electronic funds transfer (EFT). This means we will copy your check and use the account information on it to electronically debit your account for the amount of the check. The debit from your account will usually take 24 hours and your bank will show it on your regular account statement.

You will not receive your original check back. We will destroy your original check, but will keep a copy of it. If USCIS cannot process the EFT for technical reasons, you authorize us to process the copy in place of your original check. If USCIS cannot complete the EFT because of insufficient funds, we may try to make the transfer two additional times.

Where to File?

Please see our Web site at www.uscis.gov/G-639 or call our National Customer Service Center at **1-800-375-5283** for the most current information about where to file this request. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

Processing Information

Initial Processing. Once USCIS accepts your request we will check it for completeness. If you do not completely fill out this request, you will not establish a basis for your records access and USCIS may reject or deny your request.

Requests for More Information. We may request that you provide more information or evidence to support your request. We may also request that you provide the originals of any copies you submit.

Decision. The decision on Form G-639 involves a determination of whether you have provided the information required for USCIS to process your records access request. USCIS will notify you of the decision in writing.

USCIS Forms and Information

To ensure you are using the latest version of this request, visit the USCIS Web site at www.uscis.gov where you can obtain the latest USCIS forms and immigration-related information. If you do not have Internet access, you may order USCIS forms by calling our toll-free number at **1-800-870-3676**. You may also obtain forms and information by calling the USCIS National Customer Service Center at **1-800-375-5283**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

Penalties

If you knowingly and willfully falsify or conceal a material fact or submit a false document with your Form G-639, we will deny your Form G-639 and may deny any other immigration benefit. In addition, you will face severe penalties provided by law and may be subject to criminal prosecution.

USCIS Privacy Act Statement

AUTHORITIES: The information requested on this request, and the associated evidence, is collected under 5 U.S.C. 552 and 552a.

PURPOSE: The primary purpose for providing the requested information on this request is to enable USCIS to locate applicable records and to respond to requests made under the Freedom of Information Act (FOIA) and Privacy Act (PA). USCIS will use the information you provide to grant or deny the records access you are seeking.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay processing of your request or create an inability for USCIS to locate the records or information requested.

ROUTINE USES: DHS may share the information you provide on this request with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS-USCIS-007 - Benefits Information System, DHS-USCIS-001- Alien File, Index, and National File Tracking System of Records] which you can find at www.dhs.gov/privacy. DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 15 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the request, preparing statements, attaching necessary documentation, and submitting the request. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No. 1615-0102. **Do not mail your completed Form G-639 to this address.**

Appendix P: Form: ICE Affirmation/Declaration Form (Immigration Records)
For the latest version of this form, please visit: <http://www.maldef.org>



**U.S. Immigration
and Customs
Enforcement**

PLEASE RETURN TO:

Immigration and Customs Enforcement
Freedom of Information Act Office
800 North Capitol Street, Suite 585
Washington, DC 20536
Via Facsimile: (202) 732-0310

AFFIRMATION/DECLARATION

This is to affirm that

I, _____,
(PRINT FULL NAME)

request access to records maintained by the U.S. Immigration and Customs Enforcement which
pertain to me. My present address is:

my date of birth is: _____, and

my place of birth was: _____.

I understand that any knowingly or willfully seeking or obtaining access to records about another
person under false pretenses is punishable by a fine of up to \$5,000. I also understand that any
applicable fees must be paid by me.

I hereby authorize _____ access to my records.
(PRINT FULL NAME)

I request that any located and disclosable records be forwarded to the following individual:

_____ at the following address:
(PRINT FULL NAME)

I hereby declare or certify under penalty of perjury that the foregoing is true and correct.

Executed on _____.
(DATE)

(SIGNATURE OF AFFIRMANT/DECLARANT)

Appendix Q: Form: IRS Request for Transcript of Tax Return 4506-T Form (Federal Tax Records)
For the latest version of this form, please visit: <http://www.maldef.org>

New Fresno Fax Number

The fax number listed for the Internal Revenue Service RAIVS Team office in Fresno, California in Form 4506-T and Form 4506T-EZ changed from (559) 456-5876 to (559) 456-7227.

Therefore, if you filed an individual return and lived in: Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, or Wyoming, you must use (559) 456-7227 if you choose to request a transcript of your tax return by fax.

We encourage you to use our automated self-help service tools to quickly request transcripts. Please go to <http://www.irs.gov/Individuals/Get-Transcript>.

Request for Transcript of Tax Return

▶ **Request may be rejected if the form is incomplete or illegible.**

OMB No. 1545-1872

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Return or Account Transcript" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	

Caution. If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ _____

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days ☐

b Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days ☐

c Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days ☐

7 Verification of Nonfiling, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days ☐

8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days ☐

Caution. If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately. _____

Check this box if you have notified the IRS or the IRS has notified you that one of the years for which you are requesting a transcript involved **identity theft** on your federal tax return ☐

Caution. Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of the signature date.

	Phone number of taxpayer on line 1a or 2a
Sign Here ▶ Signature (see instructions)	Date
▶ Title (if line 1a above is a corporation, partnership, estate, or trust)	
▶ Spouse's signature	Date

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

CAUTION. Do not sign this form unless all applicable lines have been completed.

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note. If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Automated transcript request. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Return or Account Transcript" or call 1-800-908-9946.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most recent return.

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:

Mail or fax to:

Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address

Internal Revenue Service
RAIVS Team
Stop 6716 AUSC
Austin, TX 73301

512-460-2272

Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming

Internal Revenue Service
RAIVS Team
Stop 37106
Fresno, CA 93888

559-456-5876

Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia

Internal Revenue Service
RAIVS Team
Stop 6705 P-6
Kansas City, MO 64999

816-292-6102

Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address

Internal Revenue Service
RAIVS Team
P.O. Box 9941
Mail Stop 6734
Ogden, UT 84409

801-620-6922

Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin

Internal Revenue Service
RAIVS Team
P.O. Box 145500
Stop 2800 F
Cincinnati, OH 45250

859-669-3592

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 3. Enter your current address. If you use a P. O. box, include it on this line.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note. If the address on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Party—Business.

Line 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

Privacy Act and Paperwork Reduction Act Notice

We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 12 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Forms and Publications Division
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224

Do not send the form to this address. Instead, see *Where to file* on this page.

Appendix R: Model Letter: Selective Service Verification of Registration Letter (Military Records)

For the latest version of this model letter, please visit: <http://www.maldef.org>

Date

Selective Service System
P.O. Box 94638
Palatine, IL 60094-4636

Full Legal Name

Address Line 1

Address Line 2

Phone Number

Email Address (if available)

Re: Selective Service System Verification of Registration Letter

Dear Selective Service Office :

The purpose of this letter is to request a copy of my selective service registration records.

My identifying information is below:

Full Legal Name (Include double surname if applicable)

Date of Birth (MM-DD-YYYY format)

Mailing address **provided at the time of registration**

To authenticate my identity, attached to this letter is a copy of my: _____.

Driver's License/Other Form of Identification

If you are unable to provide a verification of my registration with Selective Service, please inform me by letter of the reason.

Additional Comments

You can mail this information to me at the above address. Please let me know if you have any questions. Thank you for your assistance.

Sincerely,

Signature

Printed full Legal Name

Appendix S: Form: FBI Applicant Information I-783 Form (Criminal Records)
For the latest version of this form, please visit: <http://www.maldef.org>

The FBI's acquisition, retention, and sharing of information submitted on this form is generally authorized under 28 USC 534 and 28 CFR 16.30-16.34. The purpose for requesting this information from you is to provide the FBI with a minimum of identifying data to permit an accurate and timely search of identity history identification records. Providing this information (including your Social Security Account Number) is voluntary; however, failure to provide the information may affect the completion of your request. The information reported on this form may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent pursuant to the Privacy Act of 1974 and all applicable routine uses. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 3 minutes to complete.

Appendix T: Form: FBI Credit Card Payment Form (Criminal Records)
For the latest version of this form, please visit: <http://www.maldef.org>

Credit Card Payment Form

* Denotes Required Fields

Applicant Name

* Name

(as it appears on credit card)

Company Name (if applicable)

* Billing Address

Billing Address 2

* City

* State/Province

* Postal (ZIP) Code

* Country

* **Credit Card #:**

* Expiration Date (MM/YYYY)

* Total Amount To Be Billed To Credit Card \$

(x \$18 US Dollars Per Request)

* Card Holder Signature

**No Charge Backs or Refunds
All Sales Final**

Appendix U: Form: FBI Identity History Summary Request Checklist (Criminal Records)
For the latest version of this form, please visit: <http://www.maldef.org>

Did You Remember To...?

Please check the boxes below to ensure that you have included everything needed to process your request.

Include a **completed** application form.

Sign your application. *Note: If for a couple, family, etc., all must sign the application.*

Include a **completed** fingerprint card. A completed fingerprint card includes the following:

1. Name
2. **Date of Birth**
3. Descriptive Data
4. All 10 rolled fingerprint impressions.
5. The plain impressions including thumbs of both hands.

Include a credit card payment form, certified check*, or money order for **\$18.00** per request.

*Note: This amount must be **exact**.*

If using a credit card, please ensure the credit card payment form is filled out completely.

Don't forget to include the expiration date of the credit card that you are using.

If paying with a certified check or money order, make it payable to the **Treasury of the United States**.

CASH OR PERSONAL/BUSINESS CHECKS ARE NOT AN ACCEPTED FORM OF PAYMENT.

Include a form of contact information (i.e., e-mail, telephone number) in case we need to contact you.

**To issue a certified check, the bank verifies that sufficient funds exist in the requestor's account to cover the check and so certifies payment at the time the check is written. Those funds are then set aside in the bank's internal account until the check is cashed or returned to the payee.*

Appendix V: Model Letter: Other Requests

For the latest version of this model letter, please visit: <http://www.maldef.org>

Date

Full Legal Name

Address Line 1

Address Line 2

Phone Number

Email Address (if available)

Recipient's Name and Title and/or Department

Institution/Entity

Address Line 1

Address Line 2

Other Contact Information (Phone, Email, Fax, etc.)

Re: _____

Subject of Request

Dear _____ :

Recipient's Name

The purpose of this letter is to request copies of my _____

Name of documents sought.

My identifying information is below:

Full Legal Name (include maiden or double surname if applicable)

Date of Birth (MM-DD-YYYY format)

Any relevant dates to help find documents (optional)

Any other relevant details (optional)

To authenticate my identity, attached to this letter is a copy of my: _____

Driver's License/Other Form of Identification (such as a valid passport)

Additional Comments

You can email this information to me at the above email or mail hard copies to the above address.
Please let me know if you have any questions. Thank you for your assistance.

Sincerely,

Signature

Printed full Legal Name