

Kentucky Dept. for Libraries and Archives P.O. Box 537, 300 Coffee Tree Road Frankfort, KY 40602

> Phone: 502.564.8300 Fax: 502.564.5773 https://kdla.ky.gov

Death Record Request Form

Date:				
Your Contact Information				
Name:				
Address:				
City:				
State/Province:				
Daytime				
Phone Number:		Preferred Method of	Preferred Method of Contact:	
Email Address		Email	Phone	
Death Record Requested			Notes: Provide any additional detail you think will be helpful in finding the requested record	
Full Name of				
Person to be Searched				
Date of Death				
County of Death				
City / Town, if known				
Race				
Age at Death, if known				
Certificate Number				
if known (1911-1966)		Preferred Method of I	Delivery:	
(.5			·	
Submit only one form & one payment at a time.		Mailed copies		
☐ I have enclosed the required fee to process this request.		Certified Mailed	d copies	
Select Fee Type		Electronic Scan	Electronic Scans	