



Greene County Combined Health District
360 Wilson Drive
Xenia, Ohio 45385
937-374-5600 / 1-866-858-3588

**VITAL STATISTICS DIVISION
APPLICATION FOR CERTIFIED DEATH CERTIFICATE**

\$19.00 per copy

Full Name of Deceased _____

Date of Death _____

Number of Copies _____ Place of Death _____

Applicant's Signature _____

Applicant's Name Printed _____

Address (current) _____

City _____ State _____ Zip _____

Burial cremation permit Yes _____ No _____

..... For Office Use Only

Date _____ Receipt # _____ Amount \$ _____

Pick-up/Mail _____ Clerk Issuing _____

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