SURVIVING RELATIVES OF DECEASED ADOPTED OR SURRENDERED PERSON REGISTRATION IDENTIFICATION

(Enter all known information.)

Ι		, state the following:
Adopted or surrendered person	's name	
	(First, Middle, La	ast)
Birth date	City and state of birth	
Date and place of death		Sex
Race		
Adopted or surrendered person	's name at birth (if known)	
	(First, Middle, La	ast)
My relationship to the deceased adult child or grandchild My name	□ surviving spouse with mi	son is (check one): nor child
,	(First, Middle, La	ast)
Birth date	City and state of birth	
Sex	Race	
If grandchild, provide your parel	nt(s) names	
Mother		
	(First, Middle, La	ast)
Father	(First, Middle, La	pot)
My D deceased parent or gran	• • •	e was surrendered for adoption to:
(Name of agency)		(City/state of agency)
on or about	. Other	dentifying information that may help to locate files

Note: You **must:** (i) be at least 21 years of age to register; (ii) submit with your registration a certified copy of the adopted or surrendered person's death certificate; (iii) if you are the adult child of a deceased adopted or surrendered person, submit a certified copy of your birth certificate with this registration; and (iv) if you are the adult grandchild of a deceased adopted or surrendered person, submit a certified copy of your birth certificate and a certified copy of your birth certificate (v) if you are the surviving wife or husband of a deceased adopted or surrendered person, submit a certified copy of your birth certificate with this registration; submit a copy of your marriage certificate with this registration and a certified copy of the minor child's birth certificate. No application from a surviving relative of a deceased adopted or surrendered person can be accepted if the adopted or surrendered person filed a Denial of Information Exchange prior to his or her death.

Date	Signature
	Printed Name