REPORT OF LOST OR STOLEN BIRTH CERTIFICATE
(Only for birth’s occurring in Wyoming)

This form cannot be used for requesting a birth certificate

Name, address, and phone number of person completing this form:

Full Name: ____________________________________________

Phone: ________________________________________________

Address: ______________________________________________

City, State, Zip: _______________________________________

Information on the birth certificate that is missing or stolen:

Full Name on Certificate: ________________________________

Date of Birth: _____________ City or County of Birth in Wyoming __________________________

Mother’s Full Maiden Name: ______________________________

About what date was the certificate missing or stolen: ________________________________

Please write a brief statement about what happened to the birth certificate:

_________________________________________________________________________________

_________________________________________________________________________________

Signed: ___________________________ Date: __________________________

Notice: In an effort to protect the Registrant from Identify Theft, records associated with lost or stolen birth certificates are flagged. Information may be shared with appropriate law enforcement agencies in an effort to protect the people of Wyoming from the threat of Identity Theft.

Return this form to:
Vital Statistics Services
2300 Capitol Avenue
Hathaway Building
Cheyenne, WY 82002