



Vital Statistics Services
 2300 Capitol Avenue • Hathaway Building
 Cheyenne, WY 82002
 Phone (307) 777-7591
 Fax (307) 777-2483 • health.wyo.gov



Stefan Johansson
 Director

Mark Gordon
 Governor

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:
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