



**REQUEST FOR SEARCH OF DEATH • FORM 3912 (REVISED 02/2024)**

At the State Office, death records are available from January 1919 to the present for deaths that occurred in the State of Georgia. A search fee for vital records has been established in accordance with GA Code Ann., 31-10 of the Official Code of Georgia. The \$25.00 fee includes a 3-year search and a certified copy if the record is found on file. Each additional copy paid for at the same time is \$5.00. The search fee is non-refundable.

Example:	1 Certified Copy	\$25.00
	+2 Additional Copies	\$10.00
		\$35.00

If this request is being mailed, please forward this completed form with a U.S. Money Order or certified check for the correct amount made payable to the State Office of Vital Records. **A valid copy of your Photo ID must accompany this request.** Please do not send cash by mail.

**Check the box that applies:**

**D** Did this death occur in the State of Georgia?

**D** Did this death occur during or after 1919?

If both boxes are not checked, please refer to the state or the county of the death. (Note: After a search is completed, the \$25 fee is non-refundable).

**PLEASE PRINT OR TYPE ALL INFORMATION LEGIBLY AND CORRECTLY BELOW.**

Enter total number of copies requested here: \_\_\_\_\_ Total Amount Due: \_\_\_\_\_

**Section 1: DECEDENT'S INFORMATION**

LEGAL FIRST NAME OF DECEDENT	MIDDLE NAME	LAST NAME	LAST NAME AT BIRTH
SEX	Date of Death (MONTH, DAY, YEAR)	AGE AT DEATH	RACE/ETHNICITY
NAME OF FUNERAL HOME			
PLACE OF DEATH (HOSPITAL, COUNTY, STATE)			
WILL THIS CERTIFICATE BE USED TO APPLY FOR A BENEFIT WITH THE U.S. DEPARTMENT OF VETERANS AFFAIRS, OR FOR USE BY ANY VETERANS ORGANIZATION?			

**Section 2: ADDITIONAL DECEDENT INFORMATION TO ASSIST WITH VERIFICATION**

DATE OF BIRTH	SOCIAL SECURITY NUMBER
ALIAS (ALSO KNOW AS):	DECEDENT'S PARENTS:

**Section 3: REQUESTER'S INFORMATION**

FIRST NAME	MIDDLE NAME	LAST NAME
STREET NAME AND No/APARTMENT No	CITY	STATE ZIP CODE
PHONE NUMBER	E-MAIL ADDRESS	
RELATIONSHIP TO DECEDENT	SIGNATURE OF REQUESTER	