

**Oregon Birth Record ORDER FORM**

QUANTITY \_\_\_\_\_ Number of certified records requested.  
\$20 first record/\$15 each additional copy  
of the same record ordered at the same time.

1. Full name on record: \_\_\_\_\_  
(First) (Full middle) (Full last)
2. Date of birth: \_\_\_\_\_ 3. Sex: \_\_\_\_\_ 4. Place of birth: \_\_\_\_\_ **OREGON**  
(MM/DD/YYYY) (M or F) (City) (County)
5. Mother's full maiden name: \_\_\_\_\_  
(First) (Full middle) (Full maiden)
6. Father's full name: \_\_\_\_\_  
(First) (Full middle) (Full last)
7. Your relationship to person named on record: \_\_\_\_\_
8. Reason for needing record: \_\_\_\_\_
9. Daytime telephone number: \_\_\_\_\_ 10. E-mail: \_\_\_\_\_
11. Name of person ordering: \_\_\_\_\_
12. Your address: \_\_\_\_\_
13. City/State/ZIP: \_\_\_\_\_
14. Signature of person ordering: \_\_\_\_\_
15. **Person ordering: Attach legible photocopy of current, valid ID or legal representative document. See back of form for alternative ID options.**

OFFICE USE ONLY DO NOT WRITE IN THIS SPACE		
Certificate number: _____		
	1	2
Film		
Film (P)		
Computer		
Indexes		
Index (P)		
DF/CO		
Refund: \$ _____		
<input type="checkbox"/> Excess fee	<input type="checkbox"/> Out/state	
<input type="checkbox"/> No record	<input type="checkbox"/> Uncompleted	
Check #: _____		
File date: _____	Amendment fee: _____	
NRL/ref. issued: _____	Full issued: _____	
Follow-up: _____	Computer copy: _____	

<p><b>Send to:</b> <b>OREGON VITAL RECORDS</b> <b>PO BOX 14050</b> <b>PORTLAND OR 97293-0050</b></p>	<p><b>Make checks/money orders payable to:</b> <b>OHA/Vital Records</b> <b>PLEASE DO NOT SEND CASH</b> <b>Checks/money orders in U. S. Dollars</b></p>
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In accordance with law – ORS 432.121, only the person named on the record, immediate family members, legal representatives, government agencies and persons licensed or registered under ORS 703.430 are eligible to access birth records. For all others, access to birth records is restricted for 100 years. Legal guardians must enclose a copy of the legal document. If you are not eligible, enclose a written permission note with a notarized signature of an eligible person.

Providing false information is a felony under ORS 432.900.

\$20.00 FOR THE FIRST RECORD; \$15.00 FOR EACH ADDITIONAL COPY OF THE SAME RECORD ORDERED AT THE SAME TIME. The \$20.00 fee is non-refundable once the search for the record has been completed. Administrative Rule 333-011-0106 (2)

**This form available in alternative formats. See second page for details.**

ENTER YOUR MAILING ADDRESS  
THIS SECTION WILL BE DETACHED AND USED AS A MAILING LABEL

Name		
Street		
City	State	ZIP

Non-Sufficient Funds (NSF) check processing policy: In the event that your check is returned unpaid for insufficient or uncollected funds, we may present your check electronically. In the ordinary course of business, your check will not be provided to you with your bank statement, but a copy can be retrieved by other means. A \$25.00 penalty may be assessed for NSF checks per ORS 30.701(5).

**See second page of form** for ordering options and processing times. Information is also available on our Web page at: [www.healthoregon.org/chs](http://www.healthoregon.org/chs) or by calling 971-673-1190.

This form can be provided upon request in alternative formats for individuals with disabilities. Other formats may include *(but are not limited to)* large print, Braille, audio recordings, Web-based communications and other electronic formats. Call 971-673-1180 (*voice*), or 971-673-0372 (*TTY*), or FAX 971-673-1203 to arrange for the alternative format that will work best for you.

**Alternative identification you can send with your mail order.**

If you don't have a valid driver's license, ID card, or passport send photocopies of three (3) different documents that include both your name and current address. Suggested documents are listed below. If you are mailing your order, make photocopies of the documents and include them with your order form.

**Documents must be dated within the last thirty days and show current mailing address where record will be mailed.**

- Utility bill (such as telephone, gas, electric, water, garbage removal) or other bill;
- Insurance statement, medical statement or paycheck stub;
- Court document or parole document;
- Work ID, unemployment statement, food stamp or other benefit card (copy both sides);
- Valid permit for firearms, fishing, hunting or other license;
- Vehicle registration, title or insurance statement.

**If you have no ID or other documents** an immediate family member can order for you. Your mother or father, your mother's parents or your father's parents (if your father is listed on your birth record), or your adult children may order and attach their ID. Records can also be released to a legal representative of an immediate family member or a government agency representative.

**How long does it take to receive a record ordered by mail?** Processing times vary between two and four weeks depending on seasonal workload changes. To assure fast processing for mail orders, use a money order instead of a personal check. Payment by personal check may delay processing by three weeks if the check is on a new account, is a temporary check, does not include a printed name or address, or has a change to the printed name or address.

**Order in person and receive the record within 15 – 20 minutes:**

State Vital Records Office: 800 NE Oregon Street, Suite 205  
Portland, OR 97232-2162

Office Hours: 8:00 a.m. to 4:45 p.m. Monday – Friday

Ordering in person is limited to immediate family members of the person named on the birth record. Person ordering must show valid ID or provide alternative documents. In some cases proof of relationship may be required if the person ordering does not share the last name of the person on the record and is not clearly an immediate family member. Payment by cash, money order or check.

**Order online:** [www.vitalchek.com](http://www.vitalchek.com)

Cost is \$32.50 for record shipped by regular mail. Overnight shipping available for an additional fee. Records will be mailed within two working days unless a record problem is discovered.