

City Clerk
City of Pittsfield
70 Allen Street, Pittsfield, MA 01201
(413) 499-9361

Please fill out and return this form to the address above, along with a photocopy of your ID, *a stamped, self-addressed, business-sized envelope* and a check or money order for \$10.00 per copy requested. Make checks payable to The City of Pittsfield. **DO NOT SEND CASH THROUGH THE MAIL.** If the date of record is unknown, please provide us with a ten-year period that you would like us to search.

BIRTH RECORD Number of copies:

Name of Subject _____		
(First)	(Middle)	(Last)
Date of Birth:		
Father's Name _____		
(First)	(Middle)	(Last)
Mother's Name _____		
(First)	(Middle)	(Last/Maiden)

MARRIAGE RECORD Number of copies:

Groom/Party A's Name _____		
(First)	(Middle)	(Last)
Bride/Party B's Name _____		
(First)	(Middle)	(Last/Maiden)
Date of Marriage:		

DEATH RECORD Number of copies:

Name of Deceased _____		
(First)	(Middle)	(Last)
Date of Death:	Date of Birth (if known):	
Father's Name _____		
(First)	(Middle)	(Last)
Mother's Name _____		
(First)	(Middle)	(Last/Maiden)

Please provide contact information:

Name:	
Address/City/State/Zip:	
Phone:	Email:
Your Signature:	
Date of Request:	