



## Death Certificate Form

**\$9.00 FOR ONE COPY, \$4.00 FOR EACH ADDITIONAL**

**BRUCE CLARK, County Clerk  
KANKAKEE COUNTY CLERK-VITAL STATISTICS  
189 EAST COURT ST., KANKAKEE, ILLINOIS 60901**

**PLEASE ATTACH A PHOTOCOPY OF YOUR DRIVER'S LICENSE OR  
STATE ID TO THIS REQUEST**

***Before Filling Out Application Be Certain DEATH  
Occured in Kankakee County***

NUMBER OF COPIES: \_\_\_\_\_

Full Name: First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Last: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Place of Death: City: \_\_\_\_\_  
Town/Village: \_\_\_\_\_

I, the undersigned, do hereby certify that I am a person, or a duly authorized agent of a person, who has a personal or property right interest in the death certificate, and am legally entitled to the certificate, as specified by Illinois Compiled Statutes 410ILCS 535/25.

Print Your Name: \_\_\_\_\_

Your Signature: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Your Relationship to Person Named on Document: \_\_\_\_\_

Indicate the Purpose for Obtaining Document:

\_\_\_\_\_  
\_\_\_\_\_

Mail to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

BRUCE CLARK, Kankakee County Clerk