

**REQUEST TO STATE VITAL RECORDS OFFICE/PETITION FOR COURT ORDER
TO FILE A WISCONSIN DELAYED BIRTH CERTIFICATE
(used in conjunction with Dept. of Health Services Form F-05030)**

Oconto County Court Case Number: _____

Case Classification Code: **30703**

PETITIONING PARTY INFORMATION:

Name: _____
Address: _____
City/State/ZIP: _____
Phone No.: _____

Petition is hereby being made to file a Wisconsin delayed birth certificate pursuant to Chapter 69.14(2)(b)6, Wis. Stats.

I, [Full name] _____, am the Petitioner in this action and am providing the following information about my birth.

I was born on [Date] _____ in [City] _____, [County] _____, [State] _____.

My mother's name is: [First] _____ [Middle] _____ [Last] _____.
My mother's full maiden name is: _____.

My father's name is: [First] _____ [Middle] _____ [Last] _____.

I have attached the supporting documentation regarding my birth [check all boxes that apply]:

- Certification of Birth Facts for Delayed Registration (Form F-05019)
- Affidavit of Personal Knowledge of a Birth for Delayed Birth Registration
- Other: _____

I was born in the State of Wisconsin, but my birth certificate did not get filed within 365 days with the Wisconsin Vital Records System.

Date: _____

Signature of Petitioning Party

Printed Name of Petitioning Party