

Borough of Hightstown

County of Mercer
State of New Jersey

REQUEST FOR COPY(S) OF VITAL RECORD

Today's Date _____

Document Requested _____

Purpose of Document _____

Number of copies requested _____

Name of Person(s) on Document _____

Date of Event _____

Place of Event _____

Name of Person Requesting _____

Address of Person Requesting _____

Relationship to Person in Document _____

Identification Presented _____

THE FEE FOR CERTIFIED COPIES OF ALL VITAL RECORDS IS \$10 PER COPY.