

**Annotation of Death Record
Abstracted from Certified
Copy of Death Certificate**

Name _____

Address _____

Date of Birth _____

Case No. _____

It is illegal in the State of Wisconsin to photocopy a vital record and use it as legal proof of an individual's death. This form will be filed in the case in lieu of the certified copy of the death certificate.

The abstractor should verify the following features of the legal certified copy of the death certificate. The certified copy of the death certificate contains all of the following:

- Raised Seal of Registrar (not a notary seal on a photocopy)
- Signature of Official that Issued Certificate and Date of Issuance
- Watermark (chain link which can be seen when held up to the light, issue date 2000 and after)

I abstracted the following information from the certified copy of the death certificate:

1. (First Name)	(Full Middle Name)	(Last Name)	(Title, e.g. Jr.)
2. Date of Birth (Month, Day, Year)	3. Date of Death (Month, Day, Year)	4. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
5. Residence Information prior to death			
6. Name of Mother Listed (First Name)	(Middle Name)	(Last Name)	
7. Name of Father Listed (First Name)	(Middle Name)	(Last Name)	
8. Place of Birth Country <input type="checkbox"/> USA or Specify:	State	City, Village, Town	County
9. Certified Copy of Death Certificate Issued by <input type="checkbox"/> State Registrar Office <input type="checkbox"/> Local Registrar Office: <input type="checkbox"/> U.S. Dept. Of State (FS 240 or DS 1350): <input type="checkbox"/> Other (Foreign Country):		10. Date of Issuance (Month, Day, Year)	
11. Date Certified Copy of Death Certificate Presented to Office (Month, Day, Year)	12. Certified Copy of Death Certificate Presented/Sent by (Name of Parent or Other Person):		

Certification Statement:

I affirm that, to the best of my knowledge and belief, I accurately abstracted the information listed on this form from a certified copy of the death certificate presented as proof of identity for the above-listed individual. The original death certificate was returned to the person who presented it.

Signature

Print or Type Name

Address

Email Address

Telephone Number

Date

State Bar No. (if any)