

Request for Genealogy

Cass County Health Department
512 High St.
Logansport, IN 46947
(574) 753-7761 Phone

Birth Record _____ Death Record _____
(Please check one)

The Cass County birth and death records begin in 1882 but there are very few late 1800's recorded here.

Full Name _____

Date of Birth _____ Date of Death _____
(If requesting Birth Record) (If requesting Death Record)

Father's Full Name _____
(If known)

Mother's Full Name (including maiden) _____
(If known)

*Any other information that may be helpful in our search such as spouses' name, place of death, name of funeral home, etc. please add to the back of form.

Name of Requestor _____

Requestor's # _____ Requestor's Email _____

Requestor's Address _____

Total Fee (\$5 per search) for non certified copy (\$10 per Certified copy)

***Cash or Money Order ONLY. Mail in requests must include a self address, stamped envelop**

Office Use

Requested _____ Total Fee _____ Cert. # _____

Receipt # _____ Request Date _____