



Lutheran Social Service

for changing lives

Request for Identifying Information Under Minnesota Statute 259.83 Subdivision 3

I, _____, request identifying information about my birth MOTHER / FATHER (circle one or both) as stipulated under 259.83 subdivision 3 of the Minnesota Statutes. I understand that the information provided under this statute includes the name, last known addresses, birth dates, and birthplaces of the birth parents named on my original birth certificate.

Signature/Date

Sworn and subscribed to before me
This _____ day of _____, 20_____.

Notary Public

Adopted Adult Name: _____(include maiden name)

Date of Birth: _____

Address: _____

Phone: _____(home)

_____ (work)

Email: _____

Adoptive Parents' Names: _____

_____ I have enclosed my fee of \$45.00

For Office Use Only

Objection Check _____ Fee Received: \$ _____ Date: _____
