

Dallas County SOUTHWESTERN INSTITUTE OF FORENSIC SCIENCES at Dallas

2355 North Stemmons Freeway
Dallas, Texas 75207
Main #: 214-920-5900
Records Dept. #: 214-920-5921 or 214-920-5920

RE: Request for **PROOF OF DEATH (S)**

Dear Records Department:

Attached is a check/money order/cashier's check/exact cash in the amount of five (\$5.00) dollars each, made payable to Dallas County.

| I am requesting Proof of Death (s) on the following person: | |
|---|------|
| SWIFS Case Number: | |
| Name of the Deceased: | |
| Date of Death: | |
| Requestor's Name: | |
| Requestor's Relationship to Deceased: | |
| Requestor's Mailing Address and Phone Number: | |
| How Many Requesting: | |
| Thank you, | |
| Signature of Requestor | Date |