

State of Georgia
Probate Court of Lumpkin County
Birth Records Request

\$25.00 per person
(Additional copies \$5.00 each at this time)
Pursuant to O.C.G.A 31-10-27

Date _____

Number of Copies Requested _____

Full name on birth certificate (maiden name if applicable)

Date of birth _____

County of birth _____

Mother's name (including maiden name)

Father's name

Your name

Relationship to the person named on the birth certificate

Self Spouse Parent Sibling Grandparent