SWORN STATEMENT

I, ___________________________________, declare under penalty of perjury under the laws of the State of California, that I am an authorized

(Applicant’s Printed Name)

person, as defined in California Health and Safety Code Section 103526 (c), and that I am a survivor of the Butte, Los Angeles, or Ventura County

(Camp, Hill, or Woolsey) Fire and lost certified copies of birth, death, or marriage records as a result.

Pursuant to the Governor’s Proclamations of a State of Emergency, I am eligible to receive a free certified copy of the birth, death, or marriage

certificate of the following individual(s):

<table>
<thead>
<tr>
<th>Name of Person Listed on Certificate</th>
<th>Applicant’s Relationship to Person Listed on Certificate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(Must Be a Relationship Listed on Page 1 of Application)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(The remaining information must be completed in the presence of a Notary Public or CDPH Vital Records staff.)

Subscribed to this ______ day of ______________, 20___, at ________________________________,  _____________.

(Day)                  (Month)                 (City)                                     (State)

______________________________________________________

(Applicant’s Signature)

Note: If submitting your order by mail, you must have your Sworn Statement notarized using the Certificate of Acknowledgment

below. The Certificate of Acknowledgment must be completed by a Notary Public. (Law enforcement and local and state
governmental agencies are exempt from the notary requirement.)

CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the
identity of the individual who signed the document to which this certificate is
attached, and not the truthfulness, accuracy, or validity of that document.

State of  _______________________)  
County of ______________________)  

On ____________ before me, _________________________________, personally appeared _______________________________________,

(insert name and title of the officer)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and
acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on
the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF
PERJURY under the laws of the State of California that the foregoing paragraph is true and correct

WITNESS my hand and official seal.

(SEAL)

SIGNATURE OF NOTARY PUBLIC