

**City of Cleveland**  
**OFFICE OF Vital Statistics**  
**PROOF OF RELATIONSHIP VERIFICATION ADDENDUM**

I \_\_\_\_\_ am hereby requesting that the social security number appear on the death certificate for \_\_\_\_\_ whose death occurred on \_\_\_\_/\_\_\_\_/\_\_\_\_ in Cuyahoga County Ohio.

\_\_\_\_\_  
 (Signature of Requestor)

\_\_\_\_/\_\_\_\_/\_\_\_\_  
 (Date)

***For Official Use Only***

Local Registrar/SFN No.	Security Paper No.	Verified By
Relationship to the Decedent		Proof of Relationship Used
<ul style="list-style-type: none"> <li><input type="checkbox"/> Spouse or legal partner</li> <li><input type="checkbox"/> Natural or adopted child</li> <li><input type="checkbox"/> Natural or adopted grandchild or great-grandchild</li> <li><input type="checkbox"/> Licensed funeral director or agent</li> <li><input type="checkbox"/> Federal/state/local government official</li> <li><input type="checkbox"/> Press or media</li> <li><input type="checkbox"/> Executor or administrator of the estate or an agent</li> <li><input type="checkbox"/> Agent with power of attorney</li> <li><input type="checkbox"/> Private investigator</li> <li><input type="checkbox"/> Other: _____</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Current state issued photo identification plus one of the following (lineal descendants only)</li> <li><input type="checkbox"/> Marriage license</li> <li><input type="checkbox"/> Decedent's Certificate of Death designating the name of the surviving spouse</li> <li><input type="checkbox"/> Birth certificate or birth certification</li> <li><input type="checkbox"/> Income tax return (1040)</li> <li><input type="checkbox"/> Bank account documentation (joint)</li> <li><input type="checkbox"/> Will or legal documentation</li> <li><input type="checkbox"/> Medical or life insurance policy</li> <li><input type="checkbox"/> Baptismal record</li> <li><input type="checkbox"/> Notarized affidavit of relationship</li> <li><input type="checkbox"/> Employee identification badge</li> <li><input type="checkbox"/> Written agency request on letterhead</li> <li><input type="checkbox"/> Written authorization executed by the decedent</li> <li><input type="checkbox"/> Legal documentation issued by a US Court</li> <li><input type="checkbox"/> Other: _____</li> </ul>	