

#### **Ohio's Online Certificate Application**

Ohio.gov Department of Health

Step 2 - Birth Certificate and Contact Information

## Name on Birth Certificate

Date of Event: 08/07/1971

City of Event:

County of Event : CUYAHOGA

State of Event : Ohio

Gender: Male

Still Living: Yes

County of Event : CUYAHOGA

#### Name of Father

Name: BARRY RICHARD JAFFE

#### Name of Mother

Name: MARTHA TEARLE

#### Mailing Address

Address: 414 DROWN

Address2:

City: OJAI

State: CA

Zip Code: 93023

### Applicant Information

Name: SCOTT MITCHELL JAFFE

# Contact Information

Phone: 805 940 7325

Email: ojaiscott@gmail.com

#### Certificate status

#### Match Found.

We have located a birth record matching the information provided on your application. Your requested number of certified copies of that record will be issued and mailed to you once payment has been completed. Please double check your listed mailing address, and click Continue to provide your payment information and complete your

Number of Certificates:1

Total Amount: \$21.50

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