

KENTUCKY SUPPLEMENTAL REPORT OF DEATH

The funeral director (listed in item 27) or the informant (listed in item 23a), may use this form to amend items 1 through 11 and items 14 through 26 on the Kentucky Certificate of Death (VS-1A). **ONLY** the informant listed in item 23a can change items 12 and 13. The certifier, who signed item 46, may amend items 30 through 50. Any item can be amended upon the presentation of a court order directing the Office of Vital Statistics to do so. A court order is required to amend any certificate that has been on file for five years per KRS 213.076 (13).

After viewing the death certificate of _____
(Name of Decedent)
who died on _____, in _____, as filed in the Office of
(Date of Death) (County of Death)
Vital Statistics, I, _____ hereby request that the Office
(Funeral Director/Certifier/Informant)
of Vital Statistics amend the following items:

Item # _____ which now reads _____
should be amended to read _____

Item # _____ which now reads _____
should be amended to read _____

Item # _____ which now reads _____
should be amended to read _____

Item # _____ which now reads _____
should be amended to read _____

(Signature of Funeral Director, Medical Certifier or Informant) (Date)

NOTE: Amendments may take up to 30 working days. Previously issued copies will be replaced at no additional charge when returned along with this form to: Vital Statistics, 275 East Main Street 1E-A, Frankfort, Kentucky 40621. If more information is needed, call (502) 564-4212. FAX (502) 564-5755.