MISSING CHILD NOTIFICATION BIRTH CERTIFICATE FLAG REQUEST FORM

New Mexico Vital Records and Health Statistics FAX (505) 827-1751

New Mexico Vital Records and Health Statistics Post Office Box 26110 Santa Fe, NM 87502

Dear State Registrar:

This report is being sent to you in accordance with the New Mexico Missing Child Reporting Act, [Section 29-15-7.1 NMSA 1978]. The act states that a law enforcement agency shall notify the State Registrar, within 24-hours (by FAX) of a reported missing child.

Upon Receipt of this notice, the State Registrar shall flag the missing child's birth certificate if the child was born in the State of New Mexico [Section 29-15-7.2 NMSA 1978].

In accordance with statu	te, the complete m	issing child's birth ir	nformation is provided:
	First	Middle	Last Name
Name of Child:			
	Month/Day/Year	1	City, County, State
Child's Date of Birth:	-	Place of Birth:	
	First	Middle	Maiden Last Name
Birth Name of Mother:			
Name of Father or Non-Custodial Parent:	First	Middle	Last Name
NOTE: (If mother is unmarried, also provide the name of the Non-Custodial parent):			
REPORTING LAW ENF	ORCEMENT AGEN	ICY:	
Date of Notice:		Case Number:	
Law Enforcement Agency:			
Mailing Address:			
Contact Person and Title:			
Telephone Number:			
	For New Mexico Vital Reco	ords and Health Statistics U	se Only
Date Flagged: File Number:			