Your organization’s logo here

[DATE]

[Your organization’s name]

 [Your organization’s address]

 Maryland Division of Vital Records

 6764-B Reisterstown Road

 Baltimore, MD 21215-0036

Dear Sir or Madam:

I am writing on behalf of Mr. / Ms. [client’s name] who is applying for his/her Maryland Birth Certificate.

Mr. / Ms. [client’s last name] is currently experiencing homelessness . As a result of his /her homelessness, he/she does not currently possess any forms of ID and therefore is unable to meet the ID requirements for ordering this document himself/ herself.

 This birth certificate is essential to Mr./Ms. [client’s last name] efforts to end his/her homelessness as he/she is unable to access services, employment, or housing without this necessary identification.

 I have included a copy of my work ID badge and my Maryland State ID as his/her case manager. If you have any questions regarding this case, please feel free to call me at [your work phone number].

Thank you for your help in this matter.

Sincerely,

 [Your name]

[Your title]

 [Your organization’s name]

 I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby authorize [your name] of the [name of your

 Print Client's Name Here

organization] to act on my behalf in ordering my Maryland Birth Certificate. I have signed below to indicate my willingness and free intent to authorize my case worker listed above to be authorized to act on my behalf for acquiring this document.

Client’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State of Maryland, County\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 On this day, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ personally appeared before me \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, known to be the person(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she signed the same as his/her voluntary act and deed, for the uses and purposes therein mentioned. Witness my hand and official seal hereto affixed.

This \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Notary Public in and for the State of Maryland.

My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.