

Application for a Certified Copy of a Marriage Certificate

For office use only

I.D. # _____
CPA # _____
REC # _____

Number of Copies _____
Amount Enclosed (\$) _____
Date of Marriage _____
Town where license was purchased _____

(Check one)	Bride	Groom	Spouse
	Name	_____	_____
	Date of Birth	_____	_____
	Name of Father/Parent	_____	_____
	Name of Mother/Parent	_____	_____

(Check one)	Bride	Groom	Spouse
	Name	_____	_____
	Date of Birth	_____	_____
	Name of Father/Parent	_____	_____
	Name of Mother/Parent	_____	_____

Your Name _____
Address _____
Town _____
State _____
Zip _____
Phone Number _____

Your relationship to the person on the marriage certificate

Intended use of Certificate

Proof of Marriage ____ Family History ____

Other (specify) _____

Date: _____

Signature: _____