



FEE: \$10.00 per copy or No Record Certification

APPLICATION TO CLERK FOR COPY OF
MARRIAGE RECORD

CERTIFICATE INFORMATION:

BRIDE/GROOM/SPOUSE NAME: _____
First Middle Last Birth Name (If Different)

DATE OF BIRTH: ____/____/____ PLACE OF BIRTH: _____

RESIDENCE (at time of marriage) _____
Street Address State

BRIDE/GROOM/SPOUSE NAME: _____
First Middle Last Birth Name (If Different)

DATE OF BIRTH: ____/____/____ PLACE OF BIRTH: _____

RESIDENCE (at time of marriage): _____
Street Address State

MARRIAGE INFORMATION:

Place Where Marriage Was Performed: _____
Town/City/Village County

Date of Marriage or Period Covered by Search: _____

Purpose for Which Record is Required: _____

What Is Your Relationship to the Person Whose Record is Required (If self, state 'SELF'): _____

APPLICANT INFO:

NAME: _____ SS# ____/____/____

TELEPHONE NO: _____ DATE: ____/____/____

SIGNATURE: _____

ADDRESS: _____

EMAIL: _____

Please note that this application must be filled out in its entirety and submitted with valid photo identification. Applications submitted by mail are payable with a money order only. Marriage certificates are not public record and are available only to the individuals listed on the marriage record.