

**APPLICATION FOR RESTRICTED CERTIFIED COPY
OF A MARRIAGE RECORD**

PLEASE REVIEW THE INSTRUCTIONS ON THE BACK BEFORE COMPLETING

1	<p>Registrant Information Fee: \$15.00 Number of copies requested: _____</p> <p>First Person: _____ First Middle Last (Maiden name if applicable)</p> <p>Second Person: _____ First Middle Last (Maiden name if applicable)</p> <p>Date of Marriage: _____</p> <p>County where license was issued: _____</p>
2	<p>Applicant Information: (Your name and address)</p> <p>Name: _____ First Middle Last</p> <p>Address: _____ Number and Street City State Zip Code</p> <p>Mailing Address: _____ If different than above Number and Street City State Zip Code</p> <p>Telephone Number: (_____) _____ With Area Code</p>
3	<p>Anyone may obtain a restricted certified copy of a birth or death record. The record is for informational purposes only and may not be used to establish identity. Restricted copies will have across the face of the document the words:</p> <p>“INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY”</p> <p>If you need a certified copy to obtain a driver’s license, passport, or register for insurance coverage you should not use a restricted certified copy of a birth or death record.</p>
4	<p>APPLICANT SIGNATURE: _____ DATE: _____</p> <hr/> <p>Office use only: Receipt # _____ Paper # _____ Date _____</p> <p>Clerk _____ Cash _____ Check# _____ MO# _____ Pick up _____ Mail _____</p>