NON-REFUNDABLE SEARCH FEE

Marriage Certificate

Full Maiden Name of Bride/Spouse:	Passport
	Government issued picture I.D.
	OR two of these:
Full Name of Groom/Spouse:	Utility bills
	□ Bank statements
Date of Marriage:	Vehicle registration
Place license issued:	Income tax return
Applicant Name:	Personal Check w/ address
	A previously issued vital record
Applicant Address:	☐ Letter from government agency requesting
	record (DHHS, WIC)
	Department of Corrections I.D. card
	Social Security Card
Indicate your Relationship to the person on	□ DD 214
requested record below:	Hospital; birth worksheet
☐ Self/Spouse	☐ License/rental agreement
□ Parent	Pay stub
☐ Guardian	□ W-2
□ Descendant	Voter Registration card
Attorney of person on record	Disability award from SSA
Genealogist ID #	□ Other
	Establishing eligibility to acquire record:
	 Related applicants must provide proof of
D : :	lineage.
By signing below, I swear/affirm that the	 Domestic Partners must provide proof of
information above is true and correct.	registration of domestic partnership
Applicant Signature:	Attorneys must provide a signed, notarized
	release from family
Today's Date:	☐ Genealogists must provide a state-issued
\$15 for 1 st copy, \$6 for each additional copy	card
NON-REFUNDABLE SEARCH FEE	☐ Do not retain copies of proof provided or

Proof of identity of applicant:

□ Driver's License

Applicant must provide one of these:

note any specific numbers

CERT#	_ # of copies
AMOUNT PAID	
CASH CHECK#_	CC
ID Shown:	
ID #:	
Expires:	
Notes:	

STATE PERSONNEL USE ONLY