Vital Records Section

TYPE OF RECORD DESIRED (Enter Number of Copies)					
Search and Certified Transcript	Fee \$10.00 per copy	Search and Certified Copy			Fee \$10.00 per copy
A Certified Transcript is an abstract from the marriage record issued under the seal of the town/city clerk. It includes the names of the contracting parties, their residence at the time the license was issued, date and place of marriage as well as date and place of birth of the bride and groom. A Certified Transcript may be used as proof that a marriage occurred.		A Certified Copy includes all of the items of information occurring on the original record of the marriage.			
		A Certified Copy may be needed where proof of parentage and certain other detailed information may be required such as: passports, veteran's benefits, court proceedings, or settlement of an estate.			
Bride/Groom/Spouse Name (as recorded on marriage license): Date of Birth:					
Name (as recorded on mamage ildense).				(or	age at time of marriage)
First Middle	Last		Birth Name (if diff	ferent)	morriago):
If Previously Married, State Name Used at that	Time:		Residence (at time of	mamage).
First Middle	Last		•	County	State
Bride/Groom/Spouse					
Name (as recorded on marriage license):					ate of Birth: rage at time of marriage)
First Middle	Last	•	Birth Name (if dif	ferent)	
If Previously Married, State Name Used at that	Time:	Residence (at time of marriage):			
First Middle :	Last			County	State
Marriage Information			0.05	- 4 - N - 1	Local Registration No.:
Place Where Marriage License Was Issued:	Place Where Marriage W		Marriage Certific if known)	cate No.:	(if known)
Town or City County	Town or City	County		Date of M	larriage or Period
Purpose for which record is required:	Covered by Search: Married on or Search from:				
In what capacity are you acting?:	ship to person whose record is required?			(mm / dd / yyyy)	
	· .	· .	Search to: (if searching	period) (mm / dd / yyyy)	
If attorney, give name and relationship of your client to person whose record is required:					
Signature of Applicant Date: Applicant's Phone Number:					
		<u>;</u>			
Name of Applicant:	Please print name and address where record is to be sent:				
Address of Applicant:					
		,			•
					,
					State ZIP
City	State ZIP	City			olale ZII