## NEW YORK STATE DEPARTMENT OF HEALTH Vital Records Section

## Application to Town/City Clerk for Copy of Marriage Record

TYPE OF RECORD D	ESIRED (Check One)			
Search and Certification Fee \$10.00 per copy	Search and Certified Copy  Fee \$10.00 per copy			
A Certification, an abstract from the marriage record issued under the seal of the Health Department, includes the names of the contracting parties, their residence at the time the license	A Certified Transcript includes all of the items of information occurring on the original record of the marriage.			
was issued as well as date and place of birth of the bride and groom.	A Certified Transcript may be needed where proof of parentage and certain other detailed information may be required such as: passports, veteran's benefits, court			
A Certification may be used as proof that a marriage occurred.	proceedings, or settlement of an estate.			

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PLEASE PRINT OR TYPE					
1 ' ' '	(Last)	Name	(First)	(Middle)	(Last)
of Constant		of Daile		·	
Groom		Bride			
Groom's Age		Bride's Age			
or Date of Birth		or Date of Birth			
	01-1-1			(Caranta)	/Ot-t-\
	State)	Residence		(County)	(State)
of Groom		of Bride			
Date of Marriage		If Bride Previo	ahı		
or Period Covered		Married, State		•	
by Search		Used at That T			•
Place Where		Place Where	IIIIC		
License Was		Marriage Was			
Issued		Performed	•		
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For what purpose is information required?		What is your relationship to person whose record is requested?			
•		If self, state "se	elf."		
					<del></del>
In what capacity are you acting?	If attorney: Name and relationship of your client to persons				
•	•	whose marriage record is required.			
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Signature of Applicant		Date			
Address of Applicant		Please print na	ame and	address where rec	ord is to be sent.
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DOH-301 (3/93)