## 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 was issued as well as date and place of birth of the bride and groom.  A Certification may be used as proof that a marriage occurred.	A Certified Transcript includes all of the items of information occurring on the original record of the marriage.  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 proceedings, or settlement of an estate.			

		PLEA	ASE COMPLETE	EOEM AN		EGE.		
PLEASE P	RINT OR TYP	E						
Name of	(First)	(Middle)	(Last)	Name of	(First)	(Middle)	(Last)	
Groom A				Bride			som	
Groom's Age or Date of				Bride's Age				
Birth				or Date of Birth				
Residence of	e (County) (State)			Residence of	(Co	(County) (State)		
	Groom							
Date of Marriage or Period Covered by Search				If Bride Previously Married, State Name				
Place Where				Used at That	Time			
License Was				to the remark that are a second	Place Where			
Issued				Marriage Was				
				Performed				
For what purpose is information required?				What is your relationship to person whose record is requested?  If self, state "self."				
In what capacity are you acting?				If attorney: Name and relationship of your client to persons whose marriage record is required.				
Signature of Applicant				Date				
Address of Applicant				Please print name and address where record is to be sent.				

DOH-301 (3/93)

(PLEASE SEE REVERSE SIDE)