## 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.			

PLEASE COMPLETE FORM AND REMIT FEE									
				Olini Pilip					
	NT OR TYPE							S. V	
Name of	(First)	(Middle)	(Last)	Name	(First)	(M	liddle)	(Last)	
Groom				of Bride					
Groom's Age				Bride's Age					
or Date of				or Date of				2	
Birth	16			Birth					
Residence of	(County)		(State)	Residence		(County)		(State)	
Groom	•			of Bride					
Date of Marria	ge			If Bride Previo	uch				
or Period Covered				Married, State Name					
by Search			46	Used at That 7				* 8 *	
Place Where				Place Where			1.7		
License Was Issued				Marriage Was					
issued				Performed	***************************************				
For what purpo	ose is informatio	on required?	·	What is your re	elationsl	nip to perso	on whose rec	ord is requested?	
				If self, state "se	elf."				
					15				
In what capacity are you acting?			If attorney: Name and relationship of your client to persons						
				whose marriag	e record	d is require	ed.	in to persons	
0:									
Signature of Ap	pplicant			Date					
								~	
Address of App	plicant			Please print		l a d du -			
				Please print na	ame and	address v	vnere record	is to be sent.	
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DOH-301 (3/93)