

Request for a Certified Copy of Marriage Record from SALISBURY

VS-39M Revised: 9/10/2009

Mail this request to the Town Vital Records office Town Clerk, PO Box 548, Salisbury, CT 06068

PLEASE PRINT

DO NOT MAIL CASH

Groom/Spouse	<u>Full Legal Name Before Marriage</u>		
	First	Middle	Last
Bride/Spouse	<u>Full Legal Name Before Marriage</u>		
	First	Middle	Last
Date of Marriage * (Month/Day/Year)		Town of Marriage	

PLEASE NOTE: In accordance with C.G.S. §7-51A, only the bride, groom or spouse listed on the marriage certificate or other persons authorized by the Department of Public Health, shall be issued a certified copy of a marriage certificate containing the Social Security numbers of the bride, groom or spouse. All other requesters will receive a certified copy of the marriage certificate without the social security numbers.

PERSON MAKING THIS REQUEST:

Name:

First Middle Last Name

Address:

Number Street

Town/City: _____ State: _____ Zip Code: _____

Telephone No.: _____ E-Mail Address: (optional): _____

Relation to Person Named in Certificate: _____

Signature: _____

The fee for a copy of Marriage Certificate at the State or Town is \$20.00 per copy.

Number of Copies Requested: _____ Amount Enclosed: \$ _____

FEE: \$20.00 PER COPY. Remit a Personal Check or Postal Money Order made payable to the Salisbury Town Clerk

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PLEASE INCLUDE A PHOTOCOPY OF YOUR DRIVER'S LICENSE