

**REQUEST FOR COPY OF MARRIAGE CERTIFICATE**

VS-39M Revised: 04/06

**PLEASE PRINT**

**DO NOT MAIL CASH**

<b>GROOM</b>	FULL NAME	FIRST	MIDDLE	LAST
<b>BRIDE</b>	FULL NAME BEFORE MARRIAGE	FIRST	MIDDLE	LAST
DATE OF MARRIAGE (MONTH/DAY/YEAR)		PLACE OF MARRIAGE TOWN		

PLEASE NOTE: IN ACCORDANCE WITH C.G.S. §7-51A, ONLY THE BRIDE, GROOM, OFFICIATOR OF THE MARRIAGE, TOWN CLERK OR REGISTRAR 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 AND GROOM. 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): \_\_\_\_\_

RELATIONSHIP TO PERSON NAMED IN CERTIFICATE \_\_\_\_\_

SIGNATURE: **X** \_\_\_\_\_

**THE LEGAL FEE IS \$ 10 PER COPY.**

NUMBER OF COPIES WANTED: \_\_\_\_\_ AMOUNT ATTACHED: \$ \_\_\_\_\_

FEE: \$10 PER COPY MONEY ORDER MADE PAYABLE TO THE TOWN/CITY OF MARRIAGE  
MAIL THIS REQUEST WITH PAYMENT TO THE TOWN CLERK AT THE TOWN/CITY OF MARRIAGE  
FOR TOWN CLERK ADDRESSES PLEASE SEE ALPHABETICAL LISTING BY TOWN  
at the Department of Public Health website: <http://www.dph.state.ct.us/oppe/townclerks.htm>

**SARAH V. BECKER**  
Town Clerk  
302 Main Street  
Old Saybrook, CT 06475