

APPLICATION FOR CERTIFIED COPY OF MARRIAGE CERTIFICATE

(Please Print)

Groom's Full Name _____

Bride's Full Maiden Name _____

Date of Marriage _____ Town of Marriage _____

INFORMATION OF PERSON MAKING APPLICATION

Name: _____

Address: _____

Town/City: _____ State: _____ Zip: _____

Phone# _____

Signature: _____ Date: _____

TO EXPEDITE YOUR REQUEST PLEASE INCLUDE

Certified check or money made payable to: Meriden City Clerk
Please include a stamped self-addressed envelope

Fee: \$20.00 per copy Number of Copies Requested _____

Mail To: Denise L. Grandy, City Clerk
 142 East Main St., Room 124
 Meriden, CT 06450