APPLICATION FOR CERTIFIED COPY OF A MARRIAGE CERTIFICATE

Those who are not authorized by law to receive a certified copy of a non-confidential marriage record will receive a certified copy marked "INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY"

☐ Non-Confidential marriage certificate: ☐ Confidential marriage certificate **(only the married couple may obtain a Confidential marriage certificate)**

To receive a Certified Copy I am:

☐ The registrant (one of the parties to the marriage)

☐ A parent, legal guardian, child, grandparent, grandchild, sibling, spouse, or domestic partner of the registrant

☐ A party entitled to receive the record as a result of a court order (include a certified copy of the court order with this request)

☐ A member of the law enforcement agency or a representative of another governmental agency, as provided by law, is who is conducting official business.

☐ An attorney representing the registrant or the registrant's estate, or any person or agency empowered by statute or appointed by a court to act on behalf of the registrant or the registrant's estate (if by power of attorney, include a copy of the power of attorney with this request)

☐ **I AM REQUESTING AN INFORMATIONAL COPY (Not available for a Confidential marriage certificate)**

APPLICANT INFORMATION (PLEASE PRINT OR TYPE)

Printed Name of Person Completing Application		Today's date	Telephone Number – ( )	
Address – Number, Street	City		State	ZIP Code
Name of Person Receiving Copies, If Different from Above	No. of Copies	$15 each Amount Enclosed	Purpose of Request	
Mailing Address for Copies, If different From Above	City		State	ZIP Code

NAMES OF BOTH PARTIES TO THE MARRIAGE (PLEASE PRINT OR TYPE)

First Name	Middle Name	Last Name as listed on marriage certificate
First Name	Middle Name	Last Name as listed on marriage certificate
Date of Marriage – Month / Day / Year	County Where License was Issued **Madera**	County of Marriage

SWORN STATEMENT

(Required for certified copy of record)

(Note: This Sworn Statement is not required when requesting an Informational Certified copy)

I, _____, declare under penalty of perjury under the laws of the State of California,
(Print Name)
that I am an authorized person, as defined in California Health and Safety code Section 103526 (c), and am eligible to receive a certified copy of the marriage certificate of the following individuals.

Name of Couple listed on the Marriage Certificate	Your Relationship to the Couple Listed on the Marriage Certificate

(The remaining information must be completed in the presence of a Notary Public)

Subscribed to this _____day of _____, 20_____, at _____, _____
(Day) (Month) (Year) (City) (State)

_____
(Signature of person requesting certified copy)

Office use only: ID info: _____