

Request for a Certified Copy of Marriage Record from the Town/City Vital Records

VS-39M Revised: 9/10/2009

Mail this request to the Town Vital Records office. For the address and phone number of Town Vital Record offices in Connecticut, please refer to our website at www.ct.gov/dph.com.

PLEASE PRINT

DO NOT MAIL CASH

| | | | |
|-------------------------------------|--|------------------|------|
| Groom/Spouse | Full Legal Name Before Marriage | | |
| | First | Middle | Last |
| Bride/Spouse | Full Legal Name Before Marriage | | |
| | 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 Postal Money Order made payable to the *City/Town*.
(Personal Checks are not accepted)

Mail this request to the *City/Town* (for town contact information, refer to our website at www.ct.gov/dph).

* Note: Copies of death or marriage certificates for events that occurred less than 4 months prior to the date of the request should be sent to the Vital Records office in the town of the event. Refer to our website at www.ct.gov/dph for town contact information.

Send To:

DARLENE DiPROTO, TOWN CLERK
41 West Street
Cromwell, CT 06416