Town of Phillips Request for Marriage Certificate/License

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Full M	aiden Name of Bride:			
	ame of Groom:			
Date of Marriage:				
How many copies?				
Applicant Name:				
Applic	ant Address:			
			-	
Indicat	e your Relationship to the person on requested re	ecord bel	ow:	
	□ Self/Spouse			Descendant
	Parent			Attorney of person on record
	🗂 Guardian			Genealogist ID #
Bv mv.	signature below, I swear/affirm that the informa	tion abov	p is	true and correct
Applicant Signature:				
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T 1 1				
Today'	s Date:			
	\$15 for 1 st copy, \$6 for e	each addi	tion	al copy
		5		
Proof of	Below line is for Cl	lerk's use o	nly	
Proof of identity of applicant: <u>Applicant must provide one of these:</u>				
	Driver's License			vernment issued picture I.D.
	Passport			
OR two of these:				
	Utility bills		Soc	ial Security Card
	Bank statements		DD	214
	Vehicle registration		Hos	pital; birth worksheet
	Income tax return		Lice	ense/rental agreement
	Personal Check w/ address		Pay	stub
	A previously issued vital record		W-2	2
	Letter from government agency requesting record		Vot	er Registration card
	(DHHS, WIC)		Dis	ability award from SSA
	Department of Corrections I.D. card		Oth	er
Establishing eligibility to acquire record:				
	Related applicants must provide proof of lineage.			
	Domestic Partners must provide proof of registration of domestic partnership			
	Attorneys must provide a signed, notarized release from family			
	Genealogists must provide a state-issued card			
Do not retain copies of proof provided or note any specific numbers				

Clerk's Initial____