APPLICATION FOR CONFIDENTIAL MARRIAGE RECORD

Pursuant to Family Code Section 509, **ONLY** the parties to the marriage are entitled to an AUTHORIZED Certified Copy of a confidential marriage record.

If applying in person the application must be signed in the presence of the cashier and valid identification must be provided.

MAIL REQUESTS MUST BE ACCOMPANIED BY A NOTARIZED CERTIFICATE OF IDENTITY

	-	BER OF COPIES ERO DE COPIAS					FOR RECORDER USE ONLY
		Month/Mes	Day	/Dia	Yea	r/Año	
Date of Marriage - F	- echa De Matrimonio						
Name of Groom - Nombre del Novio	1 st Person/Nombre de Primera Persona Middle/Segundo Last/Apellido				Apellido	File Number Searched	
Maiden Name of Bride - Nombre de soltera de la Novia	2nd Person/Nombre de Segunda Persona	bre de Segunda Persona Middle/Segundo		Last/Apellido		Doubled	
License issued in - Licencia obtenida en County Condado I certify (or declare) under penalty of perjury under the laws of the State of California that I am a party to the foregoing marriage. Date Signature							Veterans-See reverse side of first copy Veteranos-Vean el dorso de la segunda copia

DL/ID_____

Complete your name and address below. *Escriba abajo su nombre y direccion.*

NAME/NOMBRE

STREET ADDRESS/NUMERO Y CALLE

CITY / CIUDAD

STATE/ESTADO

ZIP/ZONA POSTAL

SPECIAL NOTICE TO VETERANS

You may be eligible for a free certified copy if you are applying for a veteran's pension or certain other Veteran's Administration benefits. (Section 6107, Government Code State of California)

THIS DOES NOT APPLY TO SOCIAL SECURITY AND OTHER CIVILIAN BENEFITS, EVEN IF YOU ARE A VETERAN.

If you believe you qualify for a free certified copy under these provisions, complete the following affidavit.

I hereby apply for a free certified copy of the record as shown on the reverse side and declare under penalty of perjury that the free copy is to be furnished to

		in a claim for				
FEDERAL OR S	TATE AGENCY		TYPE OF	TYPE OF BENEFIT		
DATE	SIGNATURE	OF VETERAN OR AUTHORIZED AGEN	D AGENT RELATIONSHIP OF AGENT			
	NUMBER-STREET					
	CITY	STATE	ZIP			

Note: The free copy issued on this affidavit will bear the following wording:

This certified copy has been issued free of charge on the declaration under penalty of perjury that it is to be used in a claim to the Federal Government or the State of California for veteran's benefits.