



WRITTEN APPLICATION FOR UNRESTRICTED CERTIFIED COPY OF A MARRIAGE CERTIFICATE

\$19.00 general public or \$11.00 government agencies only

Please review the instructions on the back before completing

If the record requested is not located the fee is still retained by the agency pursuant to Health and Safety Code § 103650

1	<p>Marriage Certificate Information Number of copies requested: _____</p> <p><input type="checkbox"/> Non-Confidential (Public) Marriage Certificate (\$19) <input type="checkbox"/> Confidential Marriage Certificate (\$19)</p> <p>First Party Name: _____ <small style="display: inline-block; width: 30%; text-align: center;">First</small> <small style="display: inline-block; width: 30%; text-align: center;">Middle</small> <small style="display: inline-block; width: 30%; text-align: center;">Last</small></p> <p>Second Party Name: _____ <small style="display: inline-block; width: 30%; text-align: center;">First</small> <small style="display: inline-block; width: 30%; text-align: center;">Middle</small> <small style="display: inline-block; width: 30%; text-align: center;">Last</small></p> <p>Date of Marriage: _____ County where license was issued: _____ <small style="display: inline-block; width: 15%; text-align: center;">Month</small> <small style="display: inline-block; width: 15%; text-align: center;">Day</small> <small style="display: inline-block; width: 15%; text-align: center;">Year</small></p> <p>County of Marriage: _____</p>
2	<p>Applicant Information</p> <p>Name: _____ <small style="display: inline-block; width: 30%; text-align: center;">First</small> <small style="display: inline-block; width: 30%; text-align: center;">Middle</small> <small style="display: inline-block; width: 30%; text-align: center;">Last</small></p> <p>Address _____ <small style="display: inline-block; width: 30%; text-align: center;">Number and Street</small> <small style="display: inline-block; width: 20%; text-align: center;">City</small> <small style="display: inline-block; width: 15%; text-align: center;">State</small> <small style="display: inline-block; width: 35%; text-align: center;">Zip Code</small></p> <p>Mailing Address: _____ <small style="display: inline-block; width: 30%; text-align: center;">If different from above</small> <small style="display: inline-block; width: 30%; text-align: center;">Number and Street</small> <small style="display: inline-block; width: 15%; text-align: center;">City</small> <small style="display: inline-block; width: 15%; text-align: center;">State</small> <small style="display: inline-block; width: 15%; text-align: center;">Zip Code</small></p> <p>Telephone Number: (with area code) () _____</p>
3	<p>To obtain an Unrestricted Certified Copy you must be authorized under section 103526 of the Health and Safety Code. Please review the reverse side of this application to determine which section applies and check the appropriate box below.</p> <p><input type="checkbox"/> 103526(c)(2)(A) <input type="checkbox"/> 103526(c)(2)(B) <input type="checkbox"/> 103526(c)(2)(C)</p> <p><input type="checkbox"/> 103526(c)(2)(D) <input type="checkbox"/> 103526(c)(2)(E) <input type="checkbox"/> 103526(c)(2)(F) <input type="checkbox"/> 103526(b)(1)(info copy)</p>
4	<p>I (printed name) _____ swear under penalty of perjury 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 identified on this application form. Sworn this _____ day of _____, _____, at _____ Signature: _____ <small style="display: inline-block; width: 15%; text-align: center;">(City)</small></p>
5	<p>A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy or validity of that document.</p> <p>Certificate of Acknowledgment State of _____ County of _____</p> <p>On _____ before me, _____ Notary public, personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.</p> <p>Signature _____ (seal)</p>
<p>Office Use Only: Payment Type _____ Receipt # _____ Banknote # _____ Clerk Initials _____</p>	

INSTRUCTIONS TO COMPLETE WRITTEN APPLICATION FOR UNRESTRICTED CERTIFIED COPY OF A MARRIAGE CERTIFICATE

1	<p>Marriage Certificate Information: Print or type number of copies requested Select Public or Confidential marriage certificate. NOTE: Those who are not authorized by law to receive a certified copy of a <u>confidential</u> marriage record will receive a letter confirming the existence of a confidential marriage pursuant to Family Code Section 511 (c). Print or type names of both parties to the marriage. Print or type date of marriage Print or type county where license was issued Print or type county where marriage occurred</p>
2	<p>Applicant Information: Print or type name of person ordering copy Print or type address of person ordering copy Print or type mailing address of person ordering copy, if different than address above Print or type telephone number of person ordering copy, including area code</p>
3	<p>Using the list below, check the box next to the code section in item 3 on the front of this application that authorizes you to obtain an unrestricted certified copy of a marriage record:</p> <p>103526 (c)(2)(A) The registrant or a parent or legal guardian of the registrant 103526 (c)(2)(B) A party entitled to receive the record as a result of a court order, or an attorney or a licensed adoption agency seeking the birth record in order to comply with the requirements of Section 3140 or 7603 of the Family Code. 103526 (c)(2)(C) A member of a law enforcement agency or a representative of another governmental agency, as provided by law, who is conducting official business. 103526 (c)(2)(D) A child, grandparent, grandchild, sibling, spouse or domestic partner of the registrant. 103526 (c)(2)(E) 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. 103526 (c)(2)(F) Any funeral director who orders certified copies of a death certificate on behalf of any individual specified in paragraphs (1) to (5), inclusive, of subdivision (a) or Section 7100 of the Health and Safety Code. 103526 (b)(1) If the person requesting a certified copy of a birth, death, or nonconfidential marriage record is not an authorized person or is an authorized person who is otherwise unable to satisfy the requirements of subdivision (a), the certified copy provided to the applicant shall be an informational certified copy and shall display a legend that states “ INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY ”</p>
4	<p>DO NOT COMPLETE THIS PART UNTIL YOU ARE WITH THE NOTARY PUBLIC WHO WILL PREPARE THE CERTIFICATE OF ACKNOWLEDGMENT IN ITEM 5. If requesting a copy in person, notarization is not necessary. Please complete the Sworn Statement and present it to the Customer Service Representative. Section 103526 of the California Health and Safety Code requires anyone requesting an unrestricted certified copy of a marriage record to complete and sign a sworn statement under penalty of perjury.</p>
5	<p>Certificate of Acknowledgment</p> <p>Complete items 1 to 3 on the front of this application then bring to a notary public. Complete and sign the sworn statement in item 4 in front of the notary public. Request the notary acknowledge your signature in the sworn statement in item 4. Mail the original application with the appropriate fee (\$19.00 general public or \$11.00 government agencies only).</p> <p>To: Contra Costa Recorder 555 Escobar St. Martinez, CA 94553</p>