

APPLICATION FOR CERTIFIED COPY OF MARRIAGE RECORD

PLEASE READ THE INSTRUCTIONS ON PAGE 2 BEFORE COMPLETING THIS APPLICATION

California law (Health and Safety Code Section 103526), permits only authorized individuals as listed on the application to receive certified copies of birth records. Those who are not authorized by law to receive an authorized certified copy will receive a certified informational copy with the legend, **“INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY.”**

Please indicate the type of certified copy you are requesting:

- I am requesting a **Certified AUTHORIZED** copy I am requesting a **Certified INFORMATIONAL** copy

NOTE: Both documents are certified copies of the original document on file with the California Department of Public Health – Vital Records (CDPH-VR). With the exception of the legend and redaction of signatures and Social Security Number, the documents contain the same information.

To receive an **AUTHORIZED** copy you **MUST INDICATE YOUR RELATIONSHIP TO THE REGISTRANT** below. To receive a certified copy, the applicant must sign a sworn statement that he or she is authorized to receive the certified copy. The Sworn Statement **MUST BE NOTARIZED** unless you are a member of a law enforcement agency or a representative of a state or local government agency.

RELATIONSHIP:

- | | |
|---|---|
| <input type="checkbox"/> Registrant (Name on Certificate) | <input type="checkbox"/> Sibling of Registrant |
| <input type="checkbox"/> Child of Registrant | <input type="checkbox"/> Spouse/Registered Domestic Partner of Registrant |
| <input type="checkbox"/> Parent/Legal Guardian of Registrant | <input type="checkbox"/> Grandparent/Grandchild of Registrant |
| <input type="checkbox"/> Authorized by Court Order | <input type="checkbox"/> Law Enforcement/Government Agency (Conducting Official Business) |
| <input type="checkbox"/> Attorney Representing Registrant or Registrant’s Estate | |
| <input type="checkbox"/> Power of Attorney/Executor of the Registrant’s Estate (Include a copy of the power of attorney or supporting documentation identifying you as executor.) | |

APPLICANT INFORMATION (PRINT OR TYPE) Today’s Date:

Agency Name (if applicable)		Agency Case Number		Inmate ID Number	
Name of Applicant		Signature of Applicant		Purpose of Request	
Mailing Address – Number, Street, and Unit # (if applicable)		Amount Enclosed – \$_____ Cashier Check \$_____ Money Order \$_____ Cash		Number of Copies	
City		Name of Person Receiving Copies if Different from Applicant			
State/Province	ZIP Code	Country	Mailing Address for Copies if Different from Applicant		
Daytime Telephone Number ()	Email Address		City	State	ZIP Code

MARRIAGE RECORD INFORMATION (PRINT OR TYPE)
Complete First Person and Second Person information below as shown on the marriage record, to the best of your knowledge.

Name of First Person – FIRST Name		MIDDLE Name		CURRENT LAST Name		LAST Name (Before Marriage/Domestic Partnership)	
Date of Birth (MM/DD/YYYY)		County of Birth (CA ONLY)		Father/Parent of First Person (First, Middle, Last)			
Name of Second Person – FIRST Name		MIDDLE Name		CURRENT LAST Name		LAST Name (Before Marriage/Domestic Partnership)	
Date of Birth (MM/DD/YYYY)		County of Birth (CA ONLY)		Father/Parent of Second Person (First, Middle, Last)			
Date of Marriage – Month, Day, Year		If Date Unknown, Enter Year(s)		County That Issued License		County Where Marriage Took Place	

FEE: \$15 PER COPY (Payable to Mariposa County Recorder)
PLEASE SUBMIT CASHIER CHECK, MONEY ORDER OR CASH ONLY. NO PERSONAL CHECKS.
 (Mariposa County cannot be held responsible for fees paid in cash that are lost, misdirected, or undelivered).

INFORMATION:

Public marriage records have been maintained by the California Department of Public Health – Vital Records (CDPH-VR) since July 1, 1905. CDPH-VR can ONLY provide certified copies of certificates for public marriage that occurred in the years:

- **1905 to Present (Excluding 2000 through 2008):** CDPH-VR *is not able to provide* certified copies of marriage certificates for the years 2000 through 2008. You will need to contact the County Recorder in the county where the license was issued. CDPH-VR is continually indexing marriage records and will post updates on the website as more years become available for request.
- If you require a copy within the first six months after the date of event, CDPH-VR recommends that you send your request to the County Recorder’s Office where the marriage license was issued, as CDPH-VR may not have the record available yet. If you choose to send your request to CDPH-VR within the first six months after the date of event, and the record is not available yet, CDPH-VR will issue the applicant a Certificate of No Public Record (CNPR). CDPH-VR will retain the fee for the search, per California law.
- **Confidential Marriage Records:** CDPH-VR *does not maintain* confidential marriage records. Contact the County Clerk’s Office in the county where the marriage license was issued.

INSTRUCTIONS:

1. **ONLY** individuals who are authorized by Health and Safety Code Section 103526 can obtain a Certified Copy of a Marriage Record. Page 1 identifies the individuals who are authorized to make the request. All others may receive a Certified Informational Copy which will be marked, “Informational, Not a Valid Document to Establish Identity.”
2. Complete a separate application for each marriage record requested.
3. Provide as much information as possible to help us locate the specific record you are requesting. Complete **First Person and Second Person Information** for marriage requests. If the information you provide is incomplete or inaccurate, CDPH-VR may not be able to locate the record.
4. If you require documentation that a public marriage record **does not** exist for the years 1905 to Present (excluding 2000 through 2008), check the box for CNPR (Certificate of No Public Record) Request on the application.
5. **SWORN STATEMENT:**
 - The authorized individual requesting the certified copy must sign the attached Sworn Statement, declaring under penalty of perjury that they are eligible to receive the certified copy of the marriage record, and identify their relationship to the registrant (person listed on the certificate) – the relationship must be one of those identified on Page 1. **Only one sworn statement is required for multiple records.**
 - If the application is being submitted by mail, the Sworn Statement **must be** notarized by a Notary Public. To find a Notary Public, see your local yellow pages or call your banking institution. **Law enforcement and local and state governmental agencies are exempt from the notary requirement.**
 - A Sworn Statement notarized by a foreign notary must have an apostille attached. An Apostille is a certificate that authenticates a document for use in another country. Foreign notarizations obtained from an Ambassador, Minister, Consul, Vice Consul or Consular Agent of the United States, or from a Judge of Court of record having a seal in a foreign county do not require an apostille.
 - You do not have to provide a Sworn Statement if you are requesting a certified informational copy of the marriage record.
6. Submit \$15 for **each** copy requested. If no marriage record is found, the fee will be retained for searching for the record (as required by law) and a “Certificate of No Public Record” will be issued to the applicant. Indicate the number of copies you want and include the correct fee(s) in the form of a personal check or postal or bank money order (International Money Order for out-of-country requests) made payable to **Mariposa County Recorder. PLEASE SUBMIT CASHIER CHECK (NO PERSONAL CHECKS), MONEY ORDER, OR CASH ONLY. (Mariposa County cannot be held responsible for fees paid in cash that are lost, misdirected, or undelivered).**
7. Mail completed applications with the fee(s) to:

Mariposa County Recorder
P.O. Box 35
Mariposa, CA 95338
(209) 966-5719

SWORN STATEMENT

I, _____, declare under penalty of perjury under the laws of the State of California,
(Applicant's Printed 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 birth, death, or marriage certificate of the following individual(s):

Name of Person Listed on Certificate	Applicant's Relationship to Person Listed on Certificate (Must Be a Relationship Listed on Page 1 of Application)

(The remaining information must be completed in the presence of a Notary Public or CDPH Vital Records staff.)

Subscribed to this _____ day of _____, 20____, at _____, _____.
(Day) (Month) (City) (State)

(Applicant's Signature)

Note: If submitting your order by mail, you must have your Sworn Statement notarized using the Certificate of Acknowledgment below. The Certificate of Acknowledgment must be completed by a Notary Public. (Law enforcement and local and state governmental agencies are exempt from the notary requirement.) Only one sworn statement is required for multiple records.

CERTIFICATE OF ACKNOWLEDGMENT

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.

State of _____)

County of _____)

On _____ before me, _____, personally appeared _____,
(insert name and title of the officer)

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.
(SEAL)

SIGNATURE OF NOTARY PUBLIC