



Application for a Marriage Certificate

Groom's Full Name

Bride's Full Name (Maiden)

Date of Marriage: ____/____/____

Requestor's Name

Driver's License Number

State

Requestor's Relationship

I HEREBY CERTIFY THAT ALL THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

WARNING: Making false statements and misuse of vital records can result in criminal and civil penalties. WV Code §16-5-38

Signature

Date

Requesting _____ copies at \$5.00 per copy. Total amount due: \$_____

Please send check or money orders only. Make checks payable to: **Monroe County Clerk**

Please print your address below:

Daytime Phone Number

Please send this form and a check to:

**Monroe County Clerk
PO Box 350
Union, WV 24983**