Request for a Certified Copy of Marriage Record from the Town of Voluntown Vital Records

DO NOT MAIL CASH

VS-39M Revised: 9/10/2009

PLEASE PRINT

Mail this request and a copy of photo ID to the Town Vital Records office. Town Clerk, PO Box 96, Voluntown, CT 06384

Groom/Spouse	Full Legal Na First	ame Before Marriage Middle	Last
	Full Legal Na	ame Before Marriage	
Bride/Spouse	First	Middle	Last
Date of Marriage * (Month/Day/Year))		Town of Marriage	
authorized by the Departi	nent of Public Heal	th, shall be issued a certified copy of	souse listed on the marriage certificate or other persons of a marriage certificate containing the Social Security fied copy of the marriage certificate without the social
PERSON MAKING THI	S REQUEST:		
Name:			
First		Middle	Last Name
Address:			
Number		Street	
Town/City:		State:	Zip Code:
Telephone No.:		E-Mail Address: (option	nal):
Relation to Person N	amed in Certifi	cate:	
Signature:			
The fee fo	r a copy of Ma	rriage Certificate at the St	ate or Town is \$20.00 per copy.
Number of Copies R	equested:	Amount Enclosed	: \$
		<u>Check</u> made payable to the A	Town of Voluntown Clerk, PO Box 96, Voluntown, CT 06384

^{*} **Note**: Copies of death or marriage certificates for events that occurred less than 4 months prior to the date of the request should be sent to the Vital Records office in the town of the event. Refer to our website at www.ct.gov/dph for town contact information.