Marriage Certificate

Full Maiden Name of Bride/Spouse: Full Name of Groom/Spouse: Date of Marriage: How many copies? Applicant Name: Applicant Address: (street and mailing)			
		Phone #:	
		Indicate you	r Relationship to the person on requested
		record belov	v:
			Self/Spouse
	Parent		
	Guardian		
	Descendant		
	Attorney of person on record		
	Genealogist ID #		
, , ,	below, I swear/affirm that the above is true and correct.		
Applicant	Signature:		
Todav's D	ate:		

Staff use: proof of identity provided by applicant

Applicant must provide a photocopy of one of these:

- Driver's License
- Passport
- Government issued picture I.D.

OR two of these:

- Utility bills
- Bank statements
- Vehicle registration
- Income tax return
- D Personal Check w/ address
- A previously issued vital record
- Letter from government agency requesting record (DHHS, WIC)
- Department of Corrections I.D. card
- Social Security Card
- DD 214
- ☐ Hospital; birth worksheet
- License/rental agreement
- Pay stub
- □ W-2
- Voter Registration card
- Disability award from SSA
- Other _____

Establishing eligibility to acquire record:

- □ Related applicants must provide proof of lineage.
- Domestic Partners must provide proof of registration of domestic partnership
- Attorneys must provide a signed, notarized release from family
- ☐ Genealogists must provide a state-issued card

Proof of identity and Payment must be included with all requests.

We do not retain copies of proof of identity provided or note any specific numbers after request is completed.

Payment:

\$15 for the first copy of each individual record, \$6 for each additional copy of same record requested the same day.

City of Saco City Clerk's Office 300 Main Street Saco, Maine 04072

Phone: 207-284-4831

Office Hours:

Mon.-Thur. 8:30 a.m. to 5:00 p.m. Fri. 7:30 a.m. to 4:00 p.m.