

Copy of Marriage or Civil Union License

Write Clearly

Certified copies cost \$10.00 each

Cash or checks accepted

Please make checks payable to *Brattleboro Town Clerk*

RECORD REQUESTED

Type of Record

Marriage

Civil Union

Name(s) on Certificate: _____

Date of Marriage or Civil Union: _____

APPLICANT INFORMATION:

Name: _____

Mailing Street Address: _____

Mailing City State Zip _____

Phone: _____

Your Relationship to person on the Certificate:

___ Self ___ Spouse Other: _____

SIGNATURE: _____

DATE: _____