

Request for Marriage Record

Party 1: _____ / _____ / _____
Last First Middle Initial

Party 2: _____ / _____ / _____
Last First Middle Initial

Date of Marriage: _____ Recorded Date: _____
Month Day Year Month Day Year

Document Number: _____ Book _____ Page _____
Alpha (if applicable)

Type of Document	Fee	Total
Certified Copy of a Marriage Certificate	\$15.00	
Certified Copy of an Affidavit of Application for Marriage License	\$ 7.00	
Copy of a Marriage Certificate	\$ 1.00	
Copy of an Affidavit of Application for Marriage Application	\$.50	
	Subtotal	\$

Name & Mailing Address:

Contact Phone Number: _____

Money order, cash or certified check only. We will not accept a personal check. Please make them payable to "Carson City Marriages"
Send this form and payment to: Carson City Marriages 885 E. Musser St. Suite 1025 Carson City, NV 89701