

APPLICATION FOR A CERTIFIED COPY OF MARRIAGE CERTIFICATE

Quantity Requested: _____

Best Phone Number: (____) _____ - _____

Person A Name: _____ (Maiden Name) _____

Person B Name: _____ (Maiden Name) _____

Date of Marriage: _____

Purpose for requesting certificate: _____

Your Signature: _____ Relationship: _____

A fee of \$15.00 is required by law in the State of NH for the search of the file for any one record. A fee of \$10.00 is required by law in the State of NH for each subsequent copy issued at the same time as the initial copy.

The Town Clerk of Jackson issues certified copies of birth, death, marriage and divorce certificates to qualified individuals and agencies that provide a "direct and tangible" interest in obtaining a record.

Effective January 1, 2005 all individuals requesting a certified copy of a record (pursuant to RSA 5-C:102, VI) must present positive identification which shows a current mailing address. All certified copies will only be mailed to the address on this identification.

Send the completed application (with payment and photo identification) to:

Jackson Town Clerk
Vital Records Request
PO Box 336
Jackson, NH 03846

For more information: contact the Town Clerk's Office at 603-383-4223 x102

Notice: Any person shall be guilty of a Class B Felony if he/she willfully and knowingly makes any false statement on application for a certified copy of a vital record. (RSA 126:24)