

**TOWN OF WILNA
REGISTRAR OF VITAL STATISTICS
414 STATE STREET
CARTHAGE, NY 13619**

**APPLICATION FOR A COPY OF A MARRIAGE RECORD
PLEASE COMPLETE FORM AND ENCLOSE FEE
PLEASE PRINT OR TYPE**

FEE: \$10.00 PER COPY

FEE FOR GENEALOGY: \$22.00 PER COPY

Make checks payable to: TOWN OF WILNA

DO NOT SEND CASH

<p>GROOM BRIDE</p>	(First)	(Middle)	(Last)	<p>DATE OF MARRIAGE or Period To Be Covered by Search</p>	
<p>PLACE OF MARRIAGE</p>				<p>(Village, Town, City)</p>	<p>(County)</p>
<p>NUMBER OF COPIES DESIRED</p>			<p>ENTER LOCAL REGISTRATION NO. if known</p>		

PURPOSE FOR WHICH RECORD IS REQUIRED _____

What is your relationship to person whose record is required? If self, state "self" _____

If attorney, give name and relationship of your client to person whose record is required _____

This office requires written authorization of the person or parents whose record is requested before a search is processed.

Signature of Applicant X _____

Address of Applicant _____

Date _____

<p>Please print name and address where record should be sent:</p> <p>Name _____</p> <p>Address _____</p>
