

TYPE OF RECORD DESIRED (Enter Number of Copies)

Search and
Certified Transcript

☐

Fee \$10.00
per copy

A Certified Transcript is an abstract from the marriage record issued under the seal of the town/city clerk. It includes the names of the contracting parties, their residence at the time the license was issued, date and place of marriage as well as date and place of birth of the bride and groom.

A Certified Transcript may be used as proof that a marriage occurred.

Town of Charlotte
11 Jamestown Street, PO Box 482
Sinclairville, New York 14782



Bride/Groom/Spouse

Name (as recorded on marriage license):

Date of Birth:
(or age at time of marriage)

First Middle Last

Birth Name (if different)

If Previously Married, State Name Used at that Time:

Residence (at time of marriage):

First Middle Last

County State

Bride/Groom/Spouse

Name (as recorded on marriage license):

Date of Birth:
(or age at time of marriage)

First Middle Last

Birth Name (if different)

If Previously Married, State Name Used at that Time:

Residence (at time of marriage):

First Middle Last

County State

Marriage Information

Place Where Marriage License Was Issued:

Place Where Marriage Was Performed:

Marriage Certificate No.:
(if known)

Local Registration No.:
(if known)

Town or City County

Town or City County

Purpose for which record is required:

Date of Marriage or Period
Covered by Search:

Married on or
Search from:

(mm / dd / yyyy)

In what capacity are you acting?:

What is your relationship to person whose record is required?
(If self, state "SELF".)

Search to:

(if searching period) (mm / dd / yyyy)

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

Signature of Applicant

Date:

Applicant's Phone Number:

Name of Applicant:

Please print name and address where record is to be sent:

Under penalty of perjury, I do hereby swear or affirm that the statements made herein are true and correct to the best of my knowledge and belief.

Signature

State of _____ County of _____

Subscribed and sworn to (affirmed) before me this

_____ day of _____

by _____

Notary Public

City State ZIP