REQUEST FOR SEARCH RECORDS

Cash, Check, or Money Order, made payable to Vital Records

Non-Refundable Search Fee of $10.00 per Event

Please circle one: Marriage Divorce

Name of Groom: ____________________________________________
Name of Bride: ____________________________________________
Date of Event: ____________________________________________

Any other information or comment: _____________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

Your name and address (please print): __________________________
________________________________________________________________
City, State, Zip Code: __________________________
________________________________________________________________

Phone number: ____________________________________________

FOR OFFICE USE ONLY

Amount received: ________________________ Receipt number: ________________________
No. of copies issued: ______________ Date: ________________________

(Rev.2/16/12)