

## APPLICATION FOR CERTIFIED COPY OF A MARRIAGE CERTIFICATE

Effective January 1, 2010, California State Law, Health and Safety Code Section 103526, **permits only authorized persons** as defined below to receive certified copies of marriage records.

**Note:** If the marriage license was not issued in **San Joaquin** County, then the **San Joaquin** County Clerk/Recorder will not have the marriage certificate. Please order the marriage certificate from the Recorder or County Clerk of the county where the license was issued.

**Fees: \$17.00 per copy (payable to San Joaquin County Recorder).** Copies may be obtained in person or by mail at:

**San Joaquin County Recorder  
44 N. San Joaquin St. Suite 260  
Stockton, CA. 95202**

**Please indicate the type of certified copy you are requesting:**

Non-confidential (public) marriage certificate:	Confidential marriage certificate:										
<p>To receive a <b>Certified Copy</b> I am:</p> <p><input type="checkbox"/> The registrant (one of the parties to the marriage)</p> <p><input type="checkbox"/> A parent, legal guardian, child, grandparent, grandchild, sibling, spouse, or domestic partner of the registrant</p> <p><input type="checkbox"/> A party entitled to receive the record as a result of a court order (include a certified copy of the court order with this request)</p> <p><input type="checkbox"/> A member of a law enforcement agency or a representative of another governmental agency, as provided by law, who is conducting official business</p> <p><input type="checkbox"/> An attorney representing the registrant or the registrant's estate, or any person or agency empowered by statute or appointed by a court to act on behalf of the registrant or the registrant's estate (if by power of attorney, include a copy of the power of attorney with this request)</p> <p><b>Those who are not authorized by law to receive a certified copy of a <u>non-confidential (public)</u> marriage record will receive a certified copy marked "INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY"</b></p>	<p>To receive a <b>Certified Copy</b> I am:</p> <p><input type="checkbox"/> One of the parties to the confidential marriage</p> <p><input type="checkbox"/> A party entitled to receive the record as a result of a court order (include a certified copy of the court order with this request)</p> <p><b>Those who are not authorized by law to receive a certified copy of a <u>confidential</u> marriage record will receive a letter confirming the existence of a confidential marriage pursuant to Family Code Section 511(c).</b></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th colspan="2" style="text-align: center;">For Official Use Only</th> </tr> </thead> <tbody> <tr> <td style="width: 50%;">Clerk's Initials</td> <td style="width: 50%;">Date Copy Issued</td> </tr> <tr> <td colspan="2">Type Issued</td> </tr> <tr> <td>Certificate #</td> <td>Bond Paper #</td> </tr> <tr> <td colspan="2">DL/ID #</td> </tr> </tbody> </table>	For Official Use Only		Clerk's Initials	Date Copy Issued	Type Issued		Certificate #	Bond Paper #	DL/ID #	
For Official Use Only											
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### APPLICANT INFORMATION (PLEASE PRINT OR TYPE)

Printed Name <b>and Signature</b> of Person Completing Application		Today's Date	Telephone Number – Area Code First (    )	
Address – Number, Street		City		State      ZIP Code
<b>(Non-Confidential (Public) Marriage Certificate only)</b> Name of Person Receiving Copies, if Different From Above		No. of Copies	Amount Enclosed	Purpose of Request
Mailing Address for Copies, If Different From Above		City		State      ZIP Code

### NAMES OF BOTH PARTIES TO THE MARRIAGE (PLEASE PRINT OR TYPE)

First Name	Middle Name	Last or Maiden Name as listed on marriage certificate
First Name	Middle Name	Last or Maiden Name as listed on marriage certificate
Date of Marriage – Month, Day, Year	County Where License was Issued	County of Marriage

**SWORN STATEMENT**

**(\*Required for certified copy of record. This Sworn Statement is not required when requesting an Informational certified copy which is not valid to establish identity)**

**\*Any member of a law enforcement agency or a representative of a state or local government agency, as provided by law, who orders a copy of a record to which subdivision (a) applies in conducting official business must complete the Sworn Statement, however, they may not be required to have their signature on the Sworn Statement acknowledged by a Notary Public.**

I, \_\_\_\_\_, declare under penalty of perjury under the laws of the State of California,  
(Applicant's Printed Name)

that I am an authorized person, as defined in California Health and Safety Code Section 103526 (c), and am eligible to receive a certified copy of the marriage certificate of the following individual(s):

Name of Both Parties Listed on the Marriage Certificate	Your Relationship to the Parties Listed on the Marriage Certificate

*(The remaining information must be completed in the presence of a Notary Public or County Clerk staff.)*

Subscribed to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_,  
(Day) (Month) (City) (State)

\_\_\_\_\_  
(Applicant's Signature)

***Note: If submitting your order by mail or fax, you must have your signature on the Sworn Statement acknowledged by a Notary Public using the Certificate of Acknowledgment below. If submitting your order in person, you must sign this in the presence of San Joaquin County Recorder staff.***

**CERTIFICATE OF ACKNOWLEDGMENT**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of \_\_\_\_\_ )  
   )  
County of \_\_\_\_\_ )

On \_\_\_\_\_ before me, \_\_\_\_\_ personally appeared \_\_\_\_\_,  
(Insert name and title of the officer)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.  
(SEAL)

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC