

CITY OF LEWISTON, MAINE

APPLICATION FOR A CERTIFIED COPY OF A MARRIAGE RECORD

\$10.00 for first copy, \$5.00 for each additional copy of the same record purchased at the same time

Make check payable to "City of Lewiston"

Please fill in the following items of information for searching and record identification.

****PLEASE PRINT****

Full Name of Groom: _____

Full Maiden Name of Bride: _____

Date of Marriage: _____

City/Town of Marriage: _____

City/Town of Residence at time of Marriage: _____

Your Name (Person applying for record): _____ Today's Date: _____

Your Complete Mailing Address: _____

Your Phone Number: _____

Your Signature _____ # of copies requested _____

PLEASE MAIL REQUEST TO: City Clerk's Office
27 Pine Street
Lewiston, ME 04240

****PLEASE INCLUDE A SELF ADDRESSED STAMPED ENVELOPE****

Fax Number: (207) 777-4621 If you are faxing your request please include the following:

Signature of cardholder _____

Name as it appears on the credit card _____

Visa or MasterCard # _____ Exp. Date _____

