

# WISCONSIN MARRIAGE CERTIFICATE APPLICATION

Print All Entries in Sections I-4.

**PENALTIES:** Any person who willfully and knowingly makes false application for a marriage certificate shall be fined not more than \$1,000 or imprisoned not more than 90 days, or both, per Chapter 69.24(2) Wisconsin Statutes.

<b>I. MARRIAGE INFORMATION</b>	<b>THE INFORMATION IN SECTION I IS ABOUT THE GROOM AND BRIDE NAMED ON THE MARRIAGE CERTIFICATE</b>					
	Give as much information as you can (If you are not sure about the date of marriage, give a range of dates.) List the last names of the bride and groom at the time they applied for the marriage license <b>and</b> their birth names (last names as they appear on their birth certificates), if known.					
	<b>FULL NAME OF GROOM (as it appears on the marriage certificate)</b>					
	FIRST	MIDDLE	LAST (at the time of marriage)	LAST (as it appears on groom's birth certificate, if different) ← <input type="checkbox"/> Same		
	<b>FULL NAME OF BRIDE (as it appears on the marriage certificate)</b>					
	FIRST	MIDDLE	LAST (at the time of marriage)	LAST (as it appears on bride's birth certificate, if different) ← <input type="checkbox"/> Same		
<b>CITY, VILLAGE OR TOWNSHIP OF MARRIAGE</b>		<b>COUNTY OF MARRIAGE</b>		<b>DATE OF MARRIAGE</b>		

<b>III. RELATIONSHIP TO PERSONS NAMED ON THE CERTIFICATE</b>	<b>According to Wisconsin Statute, a CERTIFIED copy of a marriage certificate is only available to a person with a "Direct and Tangible Interest." If you do not meet the criteria for boxes A – E, please refer to the information on page 2.</b>				
	<p style="text-align: center;"><b>Check one box which indicates YOUR RELATIONSHIP to the BRIDE AND/OR GROOM NAMED on the marriage certificate.</b></p> <p><input type="checkbox"/> A. I am the <b>BRIDE OR GROOM NAMED</b> on the marriage certificate (See B if applying for a copy of your spouses' marriage certificate from a prior marriage).</p> <p><input type="checkbox"/> B I am a <b>member of the immediate family</b> of the BRIDE AND/OR GROOM NAMED on the marriage certificate. (Only those listed below qualify as immediate family.) <i>NOTE: Grandchildren, step-parents, step-children (from another marriage) and step-brothers/step-sisters may only obtain certified copies as C – E.)</i></p> <p style="padding-left: 40px;">CHECK ONE: <input type="checkbox"/> Parent <input type="checkbox"/> Current Spouse (for spouse's prior marriage) <input type="checkbox"/> Child <input type="checkbox"/> Brother <input type="checkbox"/> Sister <input type="checkbox"/> Grandparent</p> <p><input type="checkbox"/> C. I am the <b>legal custodian or guardian</b> of the BRIDE OR GROOM NAMED on the marriage certificate.</p> <p><input type="checkbox"/> D. I am a <b>representative authorized</b>, in writing, by any of the aforementioned (A through C). <i>(The written, NOTARIZED authorization must accompany this application.)</i> Specify whom you represent. _____</p> <p><input type="checkbox"/> E. I can demonstrate that the information from the above-named marriage certificate is necessary for the <b>determination or protection of a personal or property right</b> for myself/my client/my agency. Specify interest. _____</p> <p><input type="checkbox"/> F. Other: Uncertified copy only. Copy will not be valid for identification purposes. (Please refer to the information on page 2.)</p>				

<b>IV. FEES</b>	<input type="checkbox"/> Search Fee (includes one copy, if found) ..... \$ 20.00 <u>\$20.00</u>
	<input type="checkbox"/> Each additional copy of the same certificate, issued at the same time as the first copy _____ X \$ 3.00 No. of Copies
<b>TOTAL</b> _____	

<b>II. APPLICANT INFORMATION</b>	<b>THE INFORMATION IN SECTION II IS ABOUT THE PERSON COMPLETING THIS APPLICATION</b>						
	APPLICANT'S NAME (your name) (Please print.)				APPLICANT'S DAYTIME TELEPHONE NUMBER (      )		
	APPLICANT'S STREET ADDRESS (cannot be a P O Box) APT. NO.			MAIL TO ADDRESS (if different) APT. NO.			
CITY/VILLAGE OR TOWNSHIP		STATE	ZIP CODE	CITY/VILLAGE OR TOWNSHIP		STATE	ZIP CODE

If you wish to receive your certificate by mail please complete this form and return it to the following address with a self-addressed stamped envelope and a cashier's check or money order (NO PERSONAL CHECKS) payable to:  
**Register of Deeds – Vital Records, 901 N. 9<sup>th</sup> Street, Milwaukee WI 53233. 414-278-4003**

**I hereby attest that the information provided on this application is correct to the best of my knowledge and belief and that I am entitled to Copies of the requested marriage certificate in accordance with the categories listed above.**

<b>SIGNATURE</b> - APPLICANT (person named in Part II who is completing this application) ➤	DATE SIGNED
--	-------------

<b>OFFICE USE ONLY</b>	<b>Certificate Number (Volume and Page)</b>
------------------------	---