## REQUEST FOR SEARCH OF MARRIAGE • FORM 3913 (REVISED 11/2016)



NOTE: Marriage Records prior to June 1952 must be requested at the office of the probate judge in the county where the license was issued.

The fee for searches of vital records has been established in accordance with GA Code Ann., 31-10 of the Official Code of Georgia. The \$10.00 fee includes a certified copy if the record is found on file. Each additional copy paid for at the same time is \$5.00. The search fee is non-refundable.

Example:	1 Certified Copy	\$10.00
	+2 Additional Copies	<u>\$10.00</u>
		\$20.00

If this request is being mailed, please forward this completed form with a U.S. Money Order or certified check for the correct amount made payable to the State Office of Vital Records. A valid copy of your Photo ID must accompany this request. Please do not send cash by mail.

## PLEASE PRINT OR TYPE ALL INFORMATION LEGIBLY AND CORRECTLY BELOW.

Enter total number of copies requested here:				_Total Amount Due:				
Section 1: COUPLE'S INFORMATION/REQUESTER'S INFORMATION								
LEGAL FIRST NAME OF PARTY 1	MIDDLE NAME		LAST NAME		LAST NAME AT BIRTH			
LEGAL FIRST NAME OF PARTY 2	MIDDLE NAME		LAST NAME		LAST NAME AT BIRTH			
DATE OF MARRIAGE			PLACE OF MARRIAGE (CITY, COUNTY, STATE)					
FIRST NAME OF REQUESTER	ST NAME OF REQUESTER LAST NAME OF REQUES			RELATIONSHIP (IF OTHER THAN A PARTY)				
E-MAIL ADDRESS OF REQUESTER		PHONE NUMBER OF REQUESTER						
SIGNATURE OF REQUESTER								
Section 2: MAILING ADDRESS								
List below the name and address of the person to whom the certificate is to be mailed and indicate their relationship to the person(s) whose name is on the certificate:								
NAME			RELATIONSHIP					
MAILING ADDRESS								
CITY		STATE		ZIP CODE				