

REQUEST FOR COPY OF MARRIAGE LICENSE

FEE: \$20.00 PER COPY

Send or Bring Request to:

**Fairfield Town Clerk
611 Old Post Road
Fairfield CT 06824**

Make check payable to Fairfield Town Clerk (If mailing, please include a self-addressed, stamped envelope).

DATE:	NUMBER OF COPIES:
FULL NAME OF GROOM/SPOUSE:	FULL NAME OF BRIDE/SPOUSE:
NAMES PRIOR TO MARRIAGE (if different):	
DATE OF MARRIAGE:	
PLACE OF MARRIAGE:	
SIGNATURE, ADDRESS (and optional): EMAIL ADDRESS OF PERSON MAKING REQUEST:	