

## CERTIFIED MARRIAGE RECORD REQUEST

Certified Marriage Certificates are **\$5.00** each, payable by Cash, check or money order to:

**Clerk of Orphans' Court of INDIANA County, PA**

**YOU MUST ENCLOSE A SELF-ADDRESSED, STAMPED ENVELOPE WITH YOUR REQUEST**

**PRINT OR TYPE CAREFULLY**

\*Full Name Applicant 1: \_\_\_\_\_

\*Full Name of Applicant 2 \_\_\_\_\_  
at time of Application:

Marriage Date: \_\_\_\_\_

Number of certified COPIES: \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_

### Fee Waiver Request – U.S. Armed Forces

The Fee is waived if the applicant is requesting the Certificate for self or spouse.

☐ I am or my current legal spouse (includes widow/widower if not remarried) is in active service or was honorably discharged from service.

Armed forces Member's name: \_\_\_\_\_

Service Number: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_

Please provide a contact Phone Number: \_\_\_\_\_

\*Date this request was sent: \_\_\_\_\_

Mail to: **CLERK OF ORPHANS' COURT-ML**  
**825 PHILADELPHIA STREET**  
**INDIANA, PA 15701**