Town of Bethel PO Box 1660 Bethel, ME 04217 (207) 824-2669

NON-REFUNDABLE SEARCH FEE <u>Marriage License</u>

Full Maiden Name of Bride/Spouse:

Full Name of Groom/Spouse:

Date of Marriage:_____ Place license issued:_____ Applicant Address:

Indicate your Relationship to the person on requested record below:

🗌 Self

🗌 Spouse

Registered Domestic Partner

Parent

🗌 Gaurdian

🗌 Descendant

Genealogist ID #_____

By signing below, I swear/affirm that the information above is true and correct.

Applicant Signature:

Today's

Date:_____

\$15 for 1st copy, \$6 for each additional copy

NON-REFUNDABLE SEARCH FEE

CERT#_____#of copies_____

ID #_____

Proof of identity of applicant: Applicant must provide one of these	
Driver's License	
Passport	
Government issued picture I.D.	
DR two of these:	
Utility Bill	
Bank statements	
Income tax return	
Personal check w/ address	
Previous issued vital record	
Ietter from government agency requesting	
record (DHHS, WIC)	
Department of corrections I.D. card	
Social security card	
DD 214	
Hospital; birth worksheet	
License/rental agreement	
Paystub	
W-2	
Voter registration card	
Disability award from USA	
Other	
Establishing eligibility to acquire records:	
Relatives must provide	
Proof of lineage	
Domestic Partners must	
provide proof of registration of domestic partnership	
Attorney's must provide	
a signed, notarized release from family	
Geneologists must proved	
a state-issued card	
Do not retain copies of proof	
Or note any specific numbers	