

CERTIFIED MARRIAGE RECORD REQUEST

Certified Marriage Certificates are **\$20.00** each, payable by check or money order to:
Clerk of Orphans' Court of Lancaster County, PA
DO NOT MAIL CASH

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

PRINT OR TYPE CAREFULLY

*Full Name of Applicant 1: _____

*Full Name of Applicant 2 _____
at time of Application:

FILE NUMBER: _____

Marriage Date: _____

[] Check here if your request is for use with a foreign adoption.

*Number of certified records: _____

*Amount Enclosed: _____
(20.00 each)

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: **Marriage License Department**
Lancaster County Courthouse
50 North Duke Street
Lancaster, PA 17602