

For official use only:	
Certificate #:	
Gov't agency	Clerk initials

CERTIFIED COPY "WILDFIRE" MARRIAGE RECORD (No Fee)

	(No Fee)				
Regular Confidential - Only Bride OR Groom may purchase - H&S 103526 (b) (2) (1) CHECK ID CONF. MARRIAGE					
Date of Ceremony/Weddingmm/dd/yyy	# of Copies Requested1	Today's Date mm/dd/yyyy			
First Person Name:	Middle	Last (Maiden)			
Second Person Name: (As Appears on License) First	Middle	Last (Maiden)			
<u>N</u>	(See H&S Code 103526 below)	<u>'S</u>			
Authorized CERTIFIED COPY of the (Sworn statement required for both Confidential & ReThe California H&S Code 103526 , permits only I am: (APPLIES TO REGULAR MARRIAGES ONLY)	egular. ID req. for Confidential) Appl				
 □ The registrant or a parent or legal guardian of the registrant. □ A party entitled to receive the record as a result of a court order, or an attorney or a licensed adoption agency seeking the birth record in order to comply with the requirements of Section 3140 or 7603 of the Family Code. □ A member of a law enforcement agency or a representative of another governmental agency, as provided by law, who is conducting official business. □ A child, grandparent, grandchild, sibling, spouse, or domestic partner of the registrant. □ An attorney representing the registrant or the registrant's estate, or any person or agency empowered by statute or appointed by a court to act on behalf of the registrant or the registrant's estate. □ Any agent or employee of a funeral establishment acting within the scope of employment who orders certified copies of a death certificate on behalf of any individual specific in paragraphs (1) to (5), inclusive, of subdivision (a) of Family Code Section 7100 (On Death Records Only). 					
Applicant Information:					
Name:Print Name	Daytime Telep	hone: ()			
Mailing Address:					
Street or PO Box	City	State Zip			

SWORN STATEMENT

	,	03526(c), and that I am a survivor of the S	later Fire in Siskiyou County and lost
Pursuant to the Governor's certificate of the following		cy, I am eligible to receive a free certified c	copy of the birth, death, or marriage
		Applicant's Relationship to P	erson Listed on Certificate
Name of Person Listed on Certificate		(Must Be a Relationship Listed on Page 1 of Application)	
(The remaining information mus	st be completed in the presence of a Notary	Public or CDPH Vital Records staff.)	
Subscribed to	this day of, (Day) (Month)	20, at	·
	(Day) (Month)	(City)	(State)
		(Applicant's	s Signature)
below. The Certificate of	f Acknowledgment must be compl	r Sworn Statement notarized using the leted by a Notary Public. (Law enforcement)	
below. The Certificate of	f Acknowledgment must be compl are exempt from the notary requir	leted by a Notary Public. (Law enford	
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State of	A notary public or other officer of identity of the individual who sign attached, and not the truthfulned. In sert name and title of the officer) If satisfactory evidence to be the person of the individual who sign attached are not the truthfulned.	personally appeared	ne within instrument and is/her/their signature(s) on certify under PENALTY OF