FLORIDA DEPARTMENT OF HEALTH

State of Florida - Department of Health
Vital Statistics
APPLICATION FOR FLORIDA COMMEMORATIVE MARRIAGE CERTIFICATE
(Available only from the State Office of Vital Statistics)

Requirement/Availability for ordering: This application is to be used for requesting a Commemorative Marriage Certificate (also includes issuance of a computer certification). If requesting only computer certification or photocopy and no commemorative, do not use this form. Use Application for Marriage Record For Licenses Issued in Florida, DH 261. Marriage records are public record and may be issued to anyone; these, therefore, make excellent gifts. Marriage records from June 6, 1927 are available at this office and beginning with 1972, the marriage application is an integral part of the record issued here. Marriage records prior to June 6, 1927 and Application to Marry prior to 1972 are obtainable only from the clerk of court (www.doh.flclerks.com) in the county where the marriage license was issued.

GROOM	**FIRST NAME**		**MIDDLE NAME**	**LAST NAME INCLUDING SUFFIX**		**DATE OF BIRTH**	**RACE**
BRIDE	**FIRST NAME**		**MIDDLE NAME**	**LAST NAME**	**MAIDEN, IF DIFFERENT**	**DATE OF BIRTH**	**RACE**
DATE OF MARRIAGE	**MONTH**	**DAY**	**YEAR (4-DIGIT)**	**CITY OR COUNTY WHERE MARRIAGE LICENSED WAS ISSUED**		**STATE FILE NO.(*If known*)**	
ADDITIONAL YEARS TO BE SEARCHED	**LIST THE SPAN OF YEARS TO BE SEARCHED (ONLY if you do no know the exact year of the event)**						

A Commemorative Marriage Certificate is signed by the current Governor and State Registrar of Vital Statistics. The certificates contain calligraphy style printing, gold state seal, and are suitable for framing and preserving as family heirlooms. The commemorative certificates are mailed encased in cardboard shields to ensure protection. Information on the application is requested to assist us in our search for the record. Information that is shown on a commemorative certificate is taken from the actual marriage certificate not the information provided on this application.

➢ **Include a check or money order in US Dollars for $30.00 made payable to the "Office of Vital Statistics".** The fee covers the search for the record, one computer certification, one commemorative certificate, and mailing. The computer certification will be mailed promptly, if event occurred prior to 1970 a certified copy will be mailed ahead of routine orders and the commemorative will follow within 4 -6 weeks.	$30	X	1	$30
➢ **If the marriage record is not located,** a No Record Found Statement of that fact is issued along with a form to request a refund for $25.00 and any additional copy fee. The $5.00 search fee is non refundable.				
➢ Additional Computer Certification, when ordered at the same time is $4.00 each.	$4	X		$0
➢ Additional Years Search is $2.00 per year and is required ONLY when the exact year of the marriage is not known and you wish more than one year searched. The maximum additional year search fee is $ 50.00 regardless of the total number of years to be searched. *(Be sure to Indicate the range of years to be searched in Information Section above)*	$2	X		$0
➢ Additional Commemorative Certification, when ordered at the same time is $25.00 each.	$25			$0
TOTAL AMOUNT ENCOLSED: ***Florida Law imposes an additional service charge of $15.00 for dishonored checks***			TOTAL	$30

Be Sure To Check Box Below For Your Special Commemorative Design Selection

(Larger images of the commemorative options can be viewed at our website at www.doh.state.fl.us)

☐

TRADITIONAL

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PALM

APPLICANT NAME/DELIVERY INFORMATION

Any person who willfully and knowingly provides any false information on a certificate, record or report required by Chapter 382, Florida Statutes, or on any application or affidavit, or who obtains confidential information from any Vital Record under false or fraudulent purposes, commits a felony of the third degree, punishable as provided in Chapter 775, Florida Statutes.

Applicant's Name **TYPE OR PRINT**	FIRST	MIDDLE	LAST (INCLUDING ANY SUFFIX)
DELIVERY ADDRESS (INCLUDE APT. NO., IF APPLICABLE)		CITY STATE	ZIP CODE
HOME PHONE NUMBER WORK PHONE NUMBER		RELATIONSHIP TO REGISTRANT	SIGNATURE OF APPLICANT Sign After Printing
IF ATTORNEY, PROVIDE BAR/PROFESSIONAL LICENSE NO.		IF ATTORNEY , PROVIDE NAME OF PERSON YOU REPRESENT AND THEIR RELATIONSHIP TO REGISTRANT	

IF THE CERTIFICATION IS TO BE MAILED TO ANOTHER PERSON OR ADDRESS USE THE SPACES BELOW TO SPECIFY SHIP TO NAME AND ADDRESS.

SHIP TO NAME **TYPE OR PRINT**	FIRST	MIDDLE	LAST (INCLUDING ANY SUFFIX)
HOME PHONE NUMBER	SHIP TO STREET ADDRESS (AND APT. NO. IF APPLICABLE)		
WORK PHONE NUMBER	CITY STATE		ZIP CODE

DH 261C, 5/09

MAIL TO: OFFICE OF VITAL STATISTICS, P.O.BOX 210, JACKSONVILLE, FL 32231-0042

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