MIFFLIN COUNTY CERTIFIED MARRIAGE RECORD/LICENSE REQUEST

PRINT OR TYPE CAREFULLY

Full name of Applicant 1: _____
(*at time of Marriage License Application)

Full name of Applicant 2: _____
(*at time of Marriage License Application)

Marriage Date: _____

Number of certified records requested: _____
Certified Marriage Certificates are **$4.00 each.**
Payable by **Check** or **Money Order** to: Clerk of Orphans' Court of Mifflin County, PA.
DO NOT MAIL CASH

Foreign Adoption Certification – Required Signature by Clerk of Orphans Court

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

Fee Waiver Request – US Armed Forces. (The fee is waived if the applicant is requesting the certificate for self or spouse)

☐ Check here if your request is for waiver of fee d/t US Armed Forces.

☐ 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 members name: _____
Service number: _____

Name and Address for mailing documents to:

Name: _____

Address: _____

Contact Phone Number: _____

***Please enclose a self-addressed, stamped envelope with your request.**

Date of Request: _____

Send this form to: Mifflin County Orphans Court
Mifflin County Courthouse
20 North Wayne Street
Lewistown PA 17044