



The City of Cambridge
Office of the City Clerk

795 Massachusetts Avenue
Cambridge, MA 02139
617-349-4260

Mon. 8:30 am to 8:00 pm
Tues., Wed. & Thur.
8:30 am to 5:00 pm
Fri. 8:30 to Noon

NUMBER OF
CERTIFIED COPIES

**MAIL IN REQUEST FORM FOR
CERTIFIED COPY OF MARRIAGE CERTIFICATE
INTENTIONS FILED IN CAMBRIDGE ONLY**

YOUR REQUEST SHOULD INCLUDE:

1. The completed request form
2. A self-addressed, stamped envelope
3. Payment of \$15.00 per certified copy - check or money order payable to the City of Cambridge
4. If either party's parents were unmarried at the time of their birth, the record is restricted and requires a photocopy of a valid ID (such as a driver's license) from the individual. Only the individuals named on the record may obtain it.

Please allow one week for mail requests to be filled

PLEASE TYPE OR PRINT

FULL NAME OF
PARTY A

First

Middle

Last (Maiden name if applicable)

FULL NAME OF
PARTY B

First

Middle

Last (Maiden name if applicable)

Date of Marriage

RELATIONSHIP TO PERSON WHOSE
CERTIFICATE IS REQUESTED

APPLICANT'S NAME

First

Middle

Last

MAILING ADDRESS

Street

City

State (Abbr.)

ZIP code

DAYTIME PHONE

E-MAIL

Signature of Applicant

Date