

LORI MARTIN

Clare County Clerk – Register of Deeds Official Abstractor

Joy Bringold – Chief Deputy Stacy B. Pechacek – Chief Deputy

225 W. Main Street P.O. Box 438 Harrison, MI 48625 Tel. (989) 539-7131 Fax (989) 539-6616

REQUEST FOR VERIFICATION OF A CLARE COUNTY MARRIAGE RECORD						
APPLIC	CANT (PERSON REQUESTING VERIFICATION)	D/	ATE:	1	1	
Please type or print clearly & legibly			•	Agency Name	e	
			•	Applicants Na	ame	
			•	Mailing Addre	ess	
Ple			•	City/State/Zip)	
			•	Phone Numb	er (required)	
APPLICANT'S SIGNATURE: Must be signed in order to process						
VERIFICATION INFORMATION - A request for a verification of a Clare County marriage (since 1887) will be returned to you stamped with an indication that a record was identified which matched the supplied facts, or that no record could be identified which matched the supplied facts. State law allows for verification of ONLY name(s) , date , place and filing of the requested event. This information must match exactly what is on the record. No additional information can be verified or supplied by this Vital Records Office. State law requires a \$10.00 fee for each search of the facts for verification.						
FACTS TO BE VERIFIED METHOD OF PAYMENT — Payment must be made in U.S. funds by money order payable to Clare County Clerk's Office - see address above.						
name or	The Record (Must match exactly what is of record)		lable	Amount To Be Enclosed	\$10.00	
First Pate Month	First Middle Sumame at Birth Date of Event (Must match exact date on record) We cannot process your request without payment.					
Cour	nty of Application for Marriage License	VERIFICATION STA	VERIFICATION STAMP (For Vital Records Official Stamp)			
Date of Filing (Date the record was filed – Enter ONLY if you have a copy of the record)					.,	