

Kentucky Dept. for Libraries and Archives P.O. Box 537, 300 Coffee Tree Road Frankfort, KY

> Phone: 502.564.8300 Fax: 502.564.5773 https://kdla.ky.gov

## **Marriage Record Request Form**

Date:		
Your Contact Information		
Name: Address: City: State/Province: Zip/Postal Code: Daytime Phone Number:	Preferred Method of Co	
Email Address:	Email	Phone
Marriage Record Requested  Name of Groom:  Bride's Maiden Name:  County:  Date of Marriage:  Race:  Book Number,  if known  Page Number,	Notes: Provide any addition finding the requested record	nal detail you think will be helpful in
if known	Preferred Method of D	elivery:
Submit only one form & one payment at a to the second seco	Certified Mailed	