



Travel Information Services, Inc.
INTERNATIONAL VISA SERVICE

CERTIFIED MARRIAGE CERTIFICATE REQUEST FORM

Date: _____

To Whom It May Concern:

Please send a certified marriage certificate for the following persons:

Groom's Name: _____

Bride's Name: _____

Date of Marriage: _____

City and State of Marriage: _____

County of Marriage: _____

I, the undersigned, give my permission to release my marriage certificate to INTERNATIONAL VISA SERVICE of Atlanta, Georgia, and/or the bearer of this letter, for the purpose of returning the certificate to me.

Signature

Signed before me this ___ day of _____, 20__.

Notary Public

316 Hammond Drive NE | Atlanta, Georgia 30328 | 404-843-0005 | 800-627-1112
© Copyright 2000 by TIS, Inc.

[Home](#)