



**COUNTY OF SAN DIEGO
ERNEST J. DRONENBURG, JR.
ASSESSOR/RECORDER/COUNTY CLERK**



**APPLICATION FOR A KEEPSAKE SOUVENIR
\$6.00 each**

BIRTH

Full Name Given at Birth: _____
 Date of Birth: _____
 Mother's Maiden Name: _____
 Place of Birth: _____

WEDDING OR ANNIVERSARY
 (Please Check box)

Full Name of First Person: _____
 First Person's State of Birth: _____
 Full Name of Second Person: _____
 Second Person's State of Birth: _____
 Date of Marriage: _____

Mail Keepsake (s) to:

Name: _____
 Address: _____
 City, State, Zip: _____
 Email: _____
 Phone: () _____
 Number of Birth _____ x \$ 6.00 = _____
 Number of Wedding _____ x \$ 6.00 = _____
 Number of Anniversary _____ x \$ 6.00 = _____

Please mail this request along with payment (Check or Money Order payable to SD County Clerk) to:

**San Diego Recorder/ County Clerk
P.O Box 121750
San Diego, CA 92112-1750**