



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



**APPLICATION FOR A CONFIDENTIAL WEDDING OR ANNIVERSARY  
KEEPSAKE SOUVENIR**

**WEDDING OR**  **ANNIVERSARY**

(Please check the 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: \_\_\_\_\_

**SWORN STATEMENT**

I, \_\_\_\_\_, declare under penalty of perjury under the laws of the State of California that  
(Print Name)

I am one of the two persons listed on the marriage record.

Subscribed to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, \_\_\_\_\_.  
(Day) (Month) (Yr) (City) (State)

\_\_\_\_\_  
(Applicant's Signature)

**Note: Your signature MUST be notarized if applying by mail. Notarization is NOT required if applying in person.**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not to the truthfulness, accuracy, or validity of that document.

**CERTIFICATE OF ACKNOWLEDGMENT**

State of \_\_\_\_\_ County of \_\_\_\_\_

On \_\_\_\_\_, before me, the undersigned notary public, personally appeared \_\_\_\_\_ who proved to me on the basis of satisfactory evidence, to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

Personally Known **OR**  Produced Identification.

Type of Identification produced \_\_\_\_\_

WITNESS my hand and official seal.

\_\_\_\_\_  
Notary Signature

**Mail Keepsake(s) to:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

Number of Wedding \_\_\_\_\_ x \$5.00 = \_\_\_\_\_

Number of Anniversary \_\_\_\_\_ x \$5.00 = \_\_\_\_\_

TOTAL = \_\_\_\_\_

*Please make a check or money order payable to San Diego  
County Recorder. Mail this request along with your payment to:  
San Diego Recorder/County Clerk  
ATTN: Vital Records  
P.O. Box 121750  
San Diego, CA 92112-1750*