

Certificate Request Form

θ Birth- \$5.00 each

θ Death- \$5.00 each

θ Marriage- \$5.00 each

	Name(s) on Certificate	Date on Certificate	# of Copies
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Requestor Name _____

Address _____

Phone Number _____ **Relationship to Above** _____

Signature _____

Include payment (check or money order, payable to Town of Sutton), along with this form and a self-addressed, stamped envelope. Be sure to include a daytime phone number so that we may contact you in the event that we have questions, need further identification, or cannot locate the certificate. Some records have restricted access and may not be available.