

Send request to:

**Cindy Goliber, Town Clerk/Registrar**  
**Town of Potsdam**  
**18 Elm Street**  
**Potsdam NY 13676**  
**315-265-3430**

Required ID must be included with application (see instructions). Make check or money order payable to the Potsdam Town Clerk.

**Birth**

Name at Birth:  
 Date of Birth:  
 Place of Birth:  
 Father's Name:  
 Mother's Maiden Name:

**MARRIAGE**

Name of Spouse:  
 Name of Bride:  
 Name of Groom:  
 Date of Marriage:  
 Place of Marriage and/or License:

**DEATH**

Name at Death:  
 Date of Death:  
 Place of Death:  
 Names of Parents:  
 Name of Spouse:

**Birth**

Name at Birth:  
 Date of Birth:  
 Place of Birth:  
 Father's Name:  
 Mother's Maiden Name:

**MARRIAGE**

Name of Spouse:  
 Name of Bride:  
 Name of Groom:  
 Date of Marriage:  
 Place of Marriage and/or License:

**DEATH**

Name at Death:  
 Date of Death:  
 Place of Death:  
 Names of Parents:  
 Name of Spouse:

**Purpose** for which record is required:

What is your **relationship** to person whose record is required?

In what **capacity** are you acting?

If attorney, give **name and relationship** of your client to person whose record is required:

Signature of Applicant:

Date Signed:  
 \_\_\_\_\_  
*mm/dd/yyyy*

Search Fee: \$10.00  
 \$10.00 X \_\_\_\_\_ Add'l uncertified copies = \_\_\_\_\_  
 Total: \_\_\_\_\_

Address of Applicant:  
 \_\_\_\_\_  
 (*Applicant's Name*)  
 \_\_\_\_\_  
 (*Street*)  
 \_\_\_\_\_  
 (*City*) \_\_\_\_\_ (*State*) \_\_\_\_\_ (*Zip*)  
 Telephone Number: \_\_\_\_\_

\* First uncertified copy is included in search fee  
 If requesting birth and marriage records, please sign the following statement:  
 To the best of my knowledge, the person(s) named in this application are deceased:  
 \_\_\_\_\_  
*Signature of Applicant*