



**JORDAN Z. MARKS
ASSESSOR/RECORDER/COUNTY CLERK
COUNTY OF SAN DIEGO**



APPLICATION FOR A KEEPSAKE SOUVENIR
(\$5.40 + cost of each keepsake in a single transaction)

BIRTH

Full Name Given at Birth: _____

Date of Birth: _____

Mother's Maiden Name: _____

Place of Birth: _____

WEDDING OR ANNIVERSARY

(Please Mark a 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: (_____) _____

*Please mail this request along with your payment
(check or money order payable to
"San Diego County Recorder") to:*

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

Multiply the number of keepsakes requested by \$1.94, then add \$5.40 to the total:

Number of Birth _____ x \$ 1.94 = \$ _____

Number of Wedding _____ x \$ 1.94 = \$ _____

Number of Anniversary _____ x \$ 1.94 = \$ _____

+ \$ 5.40 = \$ _____