(STATE EMBLEM)

STATE OF ISRAEL - MINISTRY FOR RELIGIOUS AFFAIRS

No.

File Number

MARRIAGE CERTIFICATE

PERSONAL DETAILS	THE HUSBAND	, THE WIFE
THE COUPLE		•
Family name		
Family name after		
marriage		
Given names		
Community (religious)		
Date of Birth		
Present Profession		
Place of Residence Before		
the Marriage		
Identity no.		
THE PARENTS		
Family name and given		
names of the father		
Family name and given		
names of the mother		
Father's Place of		
Residence		
mother's Place of		
Residence		
Father's Profession		
Mother's Profession		
THE WITNESSES		
Family names and given names		
Profession		

I herewith confirm, that the marriage of the above couple took place	at
	(Place of ceremony)

(Gregorian date)

And was registered in the office of the rabbinate at

(Place of Rabbinate)

[-] Authorized Rabbi's Signature Rubber Stamp

[Photograph] [Photograph] Rubber Stamp