

OFFICE USE ONLY	OCHECK OCASH OMONEY ORDER	
	CERT. #	
DATE	AMOUNT \$	
VOL PA	GE	

## IN PERSON APPLICATION FOR COPY OF MARRIAGE LICENSE

Step 1: YOUR INF	ORMATION				
(First, Middle, Last Na	me):				
Street Address:		City:	State:	Zip Code:	
		MED ON CERTIFICATE (CIRCLE ( RENT LEGAL GUARDIAN (PROOF REQUIRED) O			
Reason for Requ	uest:				
Step 2: INFORMA	TION FOR RECORD (Must	be completed to Identify Record F	Requested)		
GROOM	First Name	Middle Name	LAST	LAST NAME	
DATE OF EVENT:	Month	Day	YEAR	YEAR	
BRIDE	First Name	Middle Name	LAST	LAST NAME (MAIDEN)	
	IICH CONTAINS A FALSE STATEM	ON THIS DOCUMENT. THE PENALTY FOR KI			
Signa	ture of Applicant		Date		