

**STEPHENSON COUNTY
REQUEST FOR MARRIAGE RECORD**

One copy is \$15.00
Each additional \$2.00

NO PERSONAL CHECKS

Cash, Cashiers Check or Money Order Payable to:

Stephenson County Clerk
50 W Douglas Street ~ Suite 500
Freeport, IL 61032

<i>for office use only</i>
REG. NO. _____
SEARCHER'S INITIALS _____

Please NOTE: Non-refundable \$10.00 Search Fee for all requests

Number of copies requested _____

PLEASE PRINT INFORMATION

NAME OF GROOM _____
First name Middle Name Last Name

NAME OF BRIDE _____
First name Middle Name Last Name (Maiden)

DATE OF MARRIAGE _____

I, the undersigned, do hereby certify, under the penalties of perjury, that the representations on this application are true to the best of my knowledge and belief.

Print your name Signature

Street Address Relationship

_____ () _____
City, State, Zip Telephone Number

PLEASE CHECK THE APPROPRIATE LINE

___ WILL PICKUP

___ MAIL MARRIAGE RECORD TO THE FOLLOWING ADDRESS

NAME _____

STREET _____

CITY _____ STATE _____ ZIP _____