

Marriage Request Form

Applicant Information:

Name & Address: _____

Phone #: (_____) _____ - _____

Marriage Information:

Name of Groom & Bride: _____

Date of Marriage: _____

Place of Marriage: _____

Number of Copies: _____ (\$11 for the 1st copy and \$3 for each additional copy)

Intended use of Certificate: _____

Request must include a photocopy of a current identification

Signature of Applicant: _____

Mail Request to: **Randolph County Clerk**
#1 Taylor Street Room 202
Chester, IL 62233
(618)826-5000 x191