Calhoun County Clerk and Register of Deeds
315 W. Green St., Marshall, MI 49068
(269) 781-0718 - Fax (269) 781-0721

CERTIFIED COPY OF MARRIAGE LICENSE REQUEST FORM

Full Name of Spouse 1 (at the time of application):	**Full Name of Spouse 2 (at the time of application):**
Date of Marriage:	**Place where license was obtained (county name):**
Number of copies Requested: _____ **1 Certified Copy.....$10.00** **Add'l. copies of same record.....$5.00 (each)** **Fax fee(if request is faxed to us).....$3.00** **Total $**_____	**Method of Payment:** **Cash** _____ **Check** _____ **Credit Card** _____
Applicant's Signature:_____ **Today's Date:**_____	**IF CREDIT CARD:** **SERVICE FEES APPLY** **VISA**_____ **MASTER CARD**_____ **CARD#**_____ **EXP.DATE**_____ **SECURITY CODE**_____ **Cardholders** **Signature**_____

NOTE: **If exact year is unknown, please estimate within 5 years.**
If NO date is known, you will be instructed on how to research the records.

********** REQUIRED **********

Return Address Information: Name _____
(Please Print)

Mailing Address _____

_____

Daytime Phone # _____

PLEASE INCLUDE A SELF-ADDRESSED STAMPED ENVELOPE

REV. 2020