

DANA SMITH
DEWITT COUNTY CLERK & RECORDER
PO BOX 439
201 W WASHINGTON STREET
CLINTON IL 61727
(217-935- 7780) – PHONE (217-935-7789) – FAX

REQUEST FOR MARRIAGE/CIVIL UNION CERTIFICATE
Copies of Marriage/Civil Union Certificates are \$11.00 each.

Please certify _____ copies of the following marriage/civil union certificate:

PLEASE PRINT YOUR INFORMATION

Date of Marriage/Civil Union: _____

Full Name of Partner A: _____
(At Time of Marriage)

Date of Birth: _____

Father's Full Name: _____
(Birth Father)

Mother's Full Name: _____
(Maiden)

Full Name of Partner B: _____
(At Time of Marriage)

Date of Birth: _____

Father's Full Name: _____
(Birth Father)

Mother's Full Name: _____
(Maiden)

Signature of Applicant

Date

OFFICE USE ONLY

Born in the State of: _____

Born in the State of: _____

Age at Application: _____

Age at Application: _____

License Number: _____

Register: _____ Page: _____

Officiant Name & Title: _____

Ceremony Date: _____

Ceremony Location: _____

Application Date: _____

File Date: _____

Issue Date: _____