

\$20.00 fee for SEARCH of Record, \$6 for extra copy

**APPLICATION FOR SEARCH OF MARRIAGE RECORD**

Name of Groom/Spouse: \_\_\_\_\_

Maiden Name of Bride/Spouse: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

Your Relationship: \_\_\_\_\_

(Self, if Applicable)

Received:  Certified Copy  No Record  Certification  Genealogical

Initials: \_\_\_\_\_

Make check payable to:

Jo Daviess County Clerk

Mail application and payment to:

Jo Daviess County Clerk

330 N. Bench St., Room 108

Galena, IL 61036