

REQUEST FOR COPY OF MARRIAGE LICENSE

Spouse One _____
Last First Middle

Maiden Name: _____

Spouse Two _____
Last First Middle

Maiden Name: _____

Date of Ceremony _____ (Or range of years to search)
mm / dd / yyyy

Number of Copies _____ (\$5 each)

Number of Certified Copies _____ (\$7 each)

Requestor's Information:

Name _____

Address _____

Phone _____

Email _____

A copy of one of one spouse's photo ID must be attached for licenses done within the last 30 years.

This form along with a self-addressed, stamped envelope and check/money order can be mailed to:

Clerk of District Court
1 Main Avenue S
PO Box 487
Choteau MT 59422

Please allow five days' processing time for all requests.