



Dwight D. Sullivan

Galveston County Clerk
600 59th Street, Suite 2001
Galveston Texas 77551
(409) 766-2200

www.galvestoncountytexas.gov/our-county/county-clerk

CERTIFIED COPY REQUEST FOR MARRIAGE LICENSE

FEES AND INFORMATION	FOR OFFICE USE ONLY
<ul style="list-style-type: none">➤ Certified Marriage Records are \$9.00 per copy <u>CASH, CHECK, MONEY ORDER, or DEBIT/CREDIT</u>➤ <u>PAYMENT MUST BE ATTACHED</u> if by mail➤ <u>MAILING ADDRESS:</u> P.O. BOX 17253 GALVESTON TX, 77552	Document No. _____ Transaction No. _____ Amount \$ _____ Date _____ <input type="checkbox"/> Card <input type="checkbox"/> Check <input type="checkbox"/> Cash By _____

MARRIAGE RECORD INFORMATION GALVESTON COUNTY ONLY			
Date of Marriage	_____	Number of Copies _____	
	<i>Month/Day/Year</i>		
Marriage Applicant 1	_____	_____	_____
	<i>First</i>	<i>Middle</i>	<i>Last Name on Marriage License</i>
Marriage Applicant 2	_____	_____	_____
	<i>First</i>	<i>Middle</i>	<i>Last Name on Marriage License</i>

YOUR INFORMATION	
Name: _____	Date: _____
Mailing Address: _____	Phone #: _____
City: _____ State: _____	Zip: _____
Email: _____	
Payment Method: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Cash <input type="checkbox"/> Credit/ Debit Card	
Cardholder Name: _____	Card #: _____
Expiration Date: _____ / _____	Card CVC: _____ Zip Code: _____
Signature: _____	

(WARNING: THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT IN THIS FORM CAN BE 2-10 YEARS IN PRISON AND A FINE OF UP TO \$10,000. HCS, CHPT 678, SEC. 19.003)