APPLICATION FOR CERTIFIED COPY OF MARRIAGE LICENSE

TO:

HAYS COUNTY CLERK'S OFFICE 712 SOUTH STAGECOACH TRAIL

SAN M	ARCOS TX 78666	
DATE:		
I am requesting a Certified Copy of the Marriage License issued to:		
NAME OF APPL	LICANT 1:	-
NAME OF APPLICANT 2:		
DATE OF MARRIAGE:		
Number of Cop	oies requested:	he
amount listed enclosed. Please mail the Marriage License copy to:		
	Name	
	Street Address	
	City, State, Zip Code	

Mail this form along with the required fee

Phone Number & Email

to:

Elaine H. Cárdenas Hays County Clerk 712 South Stagecoach Trail Suite 2008 San Marcos TX 78666

Payable to: Hays County Clerk