

APPLICATION FOR CERTIFIED COPY OF MARRIAGE LICENSE

TO: HAYS COUNTY CLERK'S OFFICE
712 SOUTH STAGECOACH TRAIL
SUITE 2008
SAN MARCOS TX 78666

DATE: _____

I am requesting a Certified Copy of the Marriage License issued to:

NAME OF APPLICANT 1: _____

NAME OF APPLICANT 2: _____

DATE OF MARRIAGE: _____

Number of Copies requested: _____ @ \$20.00 EACH = \$ _____, which is the
amount listed enclosed. Please mail the Marriage License copy to:

Name

Street Address

City, State, Zip Code

Phone Number & Email - REQUIRED

**Mail this form along with the required fee
to:**

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