

PHELPS COUNTY RECORDER OF DEEDS
Marriage License Copy Order Form

Please complete the following information:

NAME OF FIRST PARTY _____
(Birth Surname, or Prior to this marriage)

NAME OF SECOND PARTY _____
(Birth Surname, or Prior to this marriage)

DATE OF MARRIAGE _____

| <u>No. of Copies</u> | <u>TYPE</u> |
|----------------------|--|
| _____ | Certified Copies @ \$9.00 each (Stamped with Seal) |

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| _____ | Photocopies @ \$1.00 |
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SEND COPIES TO: _____

CONTACT PHONE NO: _____

Please return this form with a check or money order payable to:
Phelps County Recorder along with a stamped, self-addressed envelope to:

Phelps County Recorder
200 North Main
Suite 133
Rolla, MO 65401

Office Use Only

Received: _____

Mailed: _____

Payment: _____

By: _____