YOUNG COUNTY CLERK
516 4TH STREET, ROOM 104
GRAHAM, TX 76450
PHONE # 940-549-8432

FOR OFFICE USE ONLY

CLERK_____RECIEPT #_____

YEAR_____VOL_____PAGE_____

APPLICATION FOR A CERTIFIED COPY OF MARRIAGE LICENSE

CERTIFIED COPY: $9.00

NUMBER OF COPIES____

MARRIAGE LICENSE INFORMATION

Date of Marriage:			
Fecha de matrimonio	Month/Mes	Day/Dia	Year/Ano
Husband's Name:			
Esposo	First/Primero	Middle/Segundo	Last/Appellido
Wife's Name:			
Esposo	First/Primero	Middle/Segundo	Last/Appellido
Maiden Name:			
Anterior	First/Primero	Middle/Segundo	Last/Appellido

REQUESTOR'S INFORMATION

Name:			
Nombre	First/Primero	Middle/Segundo	Last/Appellido
Home Address:			
Domicilio	Street/Calle #	Apt #	City/State/Zip
Phone #:			
Telefona			
Mailing Address:			
Lugar de correo	Street/Calle #	Apt #	City/State/Zip

Signature/Firma_____ Date/Fecha_____

☐ I wish to make voluntary contribution of $5.00 to promote healthy early childhood by supporting the Texas Home Visitation Program administered by the office of Early Childhood Coordination of Health and Human Services.

No out of state checks accepted. Please remit a cashier's check or money order for payment.

**********PLEASE ATTACH COPY OF PHOTO IDENTIFICATION**********