

**APPLICATION FOR CERTIFIED COPY OF  
MARRIAGE CERTIFICATE IN DAKOTA COUNTY**

**DAKOTA COUNTY CLERKS OFFICE  
PO BOX 39  
DAKOTA CITY, NE 68731**

**PLEASE TYPE OR PRINT LEGIBLY**

**FEE: \$5.00**

Full name of groom:

Full maiden name of bride:

**(Please list any other name the bride may have used)**

Was the Marriage License issued in Dakota County? \_\_\_\_\_ If your answer is no, then you must go to that county or apply through Nebraska Vital Statistics Office in Lincoln.

Month, day and year of marriage:

For what purpose is this record to be used? (Use reverse side if more room is needed)

**Certified copies will only be issued to the persons named in the document, their immediate family, legal guardians, or legal representatives & Government Officials. Legal guardians and legal representatives must provide a copy of the document authorizing guardianship or representation. Government Officials should show proof how they are affiliated with government. Applicant must provide photo identification. By signing this application, application attests that the recipient of this record has legal direct, tangible entitlement.**

**WARNING: IT IS A FELONY TO OBTAIN , POSSESS, USE, SELL, FURNISH, OR ATTEMPT TO OBTAIN ANY VITAL RECORD FOR PURPOSES OF DECEPTION.**

**OFFICE USE ONLY**

Date: \_\_\_\_\_

Document No.: \_\_\_\_\_

Book: \_\_\_\_\_ Page: \_\_\_\_\_

**SIGNATURE:** Please insure full signature is inside all lines.

Please provide the name and address of the person to receive the certified copy by and how you wish to receive it (check one). \_\_\_\_\_ Personally pick up \_\_\_\_\_ U.S. Mail

NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

**If personally picking up, the person named above must provide photo identification.  
if receiving by mail, please provide a copy of your driver's license or other picture identification**