

MAIL TO:
Lancaster County Clerk
555 S 10th Street
Lincoln NE 68508
Email: coclerk@lancaster.ne.gov

Certified Copy Fee \$9.00 per copy
Photocopy Fee \$.25 per copy
(Copies will be mailed out upon receipt of this form and all necessary fees.)

LANCASTER COUNTY CLERK, NEBRASKA MARRIAGE RECORD REQUEST

DO NOT COMPLETE this form if the marriage license was not issued by Lancaster County, Nebraska, or if it was issued prior to June, 1976.

APPLICANT #1 _____
First Name/Middle Initial/Last Name (Maiden Name if applicable)

APPLICANT #2 _____
First Name/Middle Initial/Last Name (Maiden Name if applicable)

DATE OF MARRIAGE _____
Month/Day/Year

WARNING: Per Nebraska Revised Statute §71-649, it is a felony to obtain, possess, use, sell, furnish or attempt to obtain any vital record for purposes of deception.

Requested by _____

If this is not your marriage record, how are you related to the applicant(s)? _____

For what purpose is this record to be used? _____

of Certified Copies _____ # of Photocopies _____

You must include a photocopy of your government issued photo ID with this form.
Examples of ID include: unexpired driver's license, State ID card, passport, etc.

Mailing Information:

Name

Mailing Address

City State Zip

Phone Number

E-mail Address

Credit/Debit Card Information:

Name as it appears on credit/debit card

Billing Address (if different than mailing address)

City State Zip

Credit/Debit Card Number (tab at each number set)

Credit/Debit Card Type Exp Date CCV Code
(Visa/MC/AE/Disc) (3 digit code on back)

* We accept cash, check or credit/debit card.
* Please do not send cash through the mail.
* **The total amount of your credit/debit card transaction will reflect pricing through the Nebraska.gov electronic payment processor.**

Cardholder Signature

For Office Use Only: ID Fee Rec'd Initials Date Mailed/Picked Up _____