



**City of Saint Louis**  
**Recorder of Deeds**  
**Sharon Quigley Carpenter**  
 Archives Department  
 City Hall, Room 129, 1200 Market Street  
 Saint Louis, Missouri 63103  
 314.589.6796 – [archives@stlouiscityrecorder.org](mailto:archives@stlouiscityrecorder.org)

**UNCERTIFIED COPY REQUEST FORM**  
**1881-1931 St. Louis City Issued**  
**Marriage Application and/or License**  
**For Genealogy Purposes Only**  
**Customer Required to Provide**  
**Correct Name and Year**

**INSTRUCTIONS**

**READ MARRIAGE RECORDS DETAILS @**  
[www.stlouiscityrecorder.org](http://www.stlouiscityrecorder.org) **Before Using Form**

- **Customer Must Provide:**
  - + **Year of Application or Ceremony**
  - + **First and Last Name of Groom**  
Or **First and Last Name of Bride**
- **Type or Print All Information Legibly**
- **\$3.00 FEE** for each Uncertified Copy of a Marriage Application
- **\$3.00 FEE** for each Uncertified Copy of a Marriage License
- **\$3.00 FEE** for each Uncertified Copy of a Parental Consent Affidavit
- **NO PERSONAL CHECKS.** Payment must be made by Cash or Money Order/Business Check/Cashier's Check made out to: Recorder of Deeds
- **MAIL-IN SERVICE**—Mail completed Form with Payment (see above), and Self-Addressed-Stamped-Envelope (or add 50 cents to Payment for mailing) to above Archives Dept. address
- **WALK-IN SERVICE**-- Bring this Form completed with Payment (see above) to above Archives Dept. address.  
 ATMS available in City Hall, First Floor:  
 Room 104 (License Collector)  
 Room 109 (Collector of Revenue)

For Office Use Only

Application/License # \_\_\_\_\_

Abstract Book & Page \_\_\_\_\_, \_\_\_\_\_

Date Received \_\_\_\_\_

Date Replied \_\_\_\_\_

Amount Received \$ \_\_\_\_\_

**CUSTOMER INFORMATION**

***This Form is for Uncertified Copies of Marriage Records made between 1881-1931. Uncertified Copies are for Genealogy Purposes Only. Do not request an Uncertified Copy if you need the copy for court, name change, benefits application, dual citizenship application, or other legal matter.***

**Customer Name:**

\_\_\_\_\_

First Name + Middle Name + Last Name

**Daytime Phone:** ( \_\_\_\_\_ ) \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Mailing Address:**

\_\_\_\_\_

Street Number + Street Name + Suite/Apt. Number

\_\_\_\_\_

City + State + Zip Code

**MARRIAGE APPLICATION/LICENSE INFORMATION**

**Enclosing \$ \_\_\_\_\_ for \_\_\_\_\_ uncertified copy (copies) of Marriage Application**

**Enclosing \$ \_\_\_\_\_ for \_\_\_\_\_ uncertified copy (copies) of Marriage License**

**Enclosing \$ \_\_\_\_\_ for \_\_\_\_\_ uncertified copy (copies) of Parental Consent Affidavit**

+ \$0.50 for mailing if customer does not provide self-addressed-stamped-envelope

**\$ \_\_\_\_\_ Total Enclosed      Application & License Number/Book-Page (optional) \_\_\_\_\_**

**Date of Application or Ceremony** \_\_\_\_\_  
 (month)                      (day)                      (year- required to use this form)

**Groom Name** (name at time of Application) \_\_\_\_\_  
 First Name                      Middle Name                      Last Name

**Bride Name** (name at time of Application) \_\_\_\_\_  
 First Name                      Middle Name                      Last Name