Madison County Records Center

Instructions for Marriage Records Copy Request Form

(PLEASE READ BEFORE COMPLETING FORM)

Please use the reference information you obtained via e-mail or over the phone to complete the following form. If you have yet to acquire this information, please e-mail the Madison County Records Center at mcrc@madisoncountyal.gov or call 256-532-2347.

If paying via check or money order, please mail the form with payment to:

Madison County Records Center
ATTN: Records Request
915 Monroe Street ***(PLEASE ALLOW 5-7 BUSINESS DAYS)***
Huntsville, AL 35801

If paying via credit or debit card, please download the form, complete, and e-mail to mcrc@madisoncountyal.gov *Subject line: Records Request*. Then you may call 256-532-2347 to submit payment over the phone.

NOTE: Madison County does not accept credit or debit cards, but we are able to provide this service thanks to IMS Enterprises, Inc., an internet company. There is a ***3% processing fee*** added to the total of each transaction. None of this fee is kept by the county. Please do not use your credit/debit card unless you are willing to pay this fee**.**

Payment Info: Payment must be received ***before*** MCRC will process your records request.

Acceptable Forms of payment:

CHECKS OR MONEY ORDERS ARE TO BE MADE PAYABLE TO: ***JUDGE OF PROBATE, MADISON COUNTY***. INCLUDE DAYTIME PHONE ON ALL CHECKS. PLEASE REFERENCE THE FEE SCHEDULE BELOW.

Fees:

Non-certified copies: $1.00 ***each***

Certified copies: $2.00 ***each***

The Madison County Records Center and its employees are not responsible for any errors in the information supplied and are not liable for any use or disclosure of said information. This office provides archived official court records of Madison County and cannot provide information regarding any other county or state. MCRC employees are not professional genealogists, historians or researchers and do not perform open-ended search requests

MADISON COUNTY RECORDS CENTER
REQUEST FOR COPIES OF MARRIAGE RECORDS
(*Please submit ONE form per EACH record request*)

THIS FORM MUST BE COMPLETED AND ACCOMPANIED BY THE APPROPRIATE PAYMENT *BEFORE* MCRC STAFF WILL PROCESS YOUR REQUEST.

DATE: _____

REQUESTED INFORMATION:

TYPE OF RECORD REQUESTED: **MARRIAGE LICENSE**

NAME(S): _____

YEAR: _____

REFERENCE NUMBER (CASE NO. OR VOLUME & PAGE): _____

NUMBER OF COPIES REQUESTED: _____

IS CERTIFICATION REQUIRED? ☐ **YES** ☐ **NO**

(Place an "X" in the appropriate box)

CONTACT INFORMATION OF INDIVIDUAL REQUESTING COPIES:

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

DAYTIME PHONE NUMBER (IN CASE OF A PROBLEM OR QUESTION): (_____) _____ - _____

E-MAIL ADDRESS (FOR NON-LOCAL INDIVIDUALS): _____

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