

Request for Marriage / Civil Union Record
Ogle County Clerk, 105 S 5th St – Suite 104, Oregon, IL 61061
Self-addressed stamped envelope is required

Male or Partner A Name: _____

Female (Maiden) or Partner B Name: _____

Date of Marriage / Civil Union _____
(Circle One)

Number of Copies Requested _____
First Copy is \$22.00; Add'l Copies are \$4.00 each

Applicant's Signature _____

Address _____
Street City State Zip Code

Relationship to Person _____