

Applying for a Marriage License by Mail:

Please include the following information in your request:

Name: _____

Address: _____

City/State/Zip: _____

Daytime Phone Numbers (include area codes):

() _____

() _____

Groom's Full Name: _____

Bride's Full Name: _____

Mail Your Request To:

**Clatsop County Clerk
820 Exchange St., Suite 220
Astoria, OR 97103**