



Certificate of Filing

MINNESOTA STATUTE 517.04 PERSONS AUTHORIZED TO PERFORM CIVIL MARRIAGES
 Civil marriages may be solemnized throughout the state by an individual who has attained the age of 21 years and is a judge of a court of record, a retired judge of a court of record, a court administrator, a retired court administrator with the approval of the chief judge of the judicial district, a former court commissioner who is employed by the court system or is acting pursuant to an order of the chief judge of the commissioner's judicial district, the residential school superintendent of the Minnesota State Academy for the Deaf and the Minnesota State Academy for the Blind, a licensed or ordained minister of any religious denomination, an individual who registers as a civil marriage officiant with a local registrar in a county of this state, or by any mode recognized in section 517.18. For purposes of this section, a court of record includes the Office of Administrative Hearings under section 14.48.

MINNESOTA STATUTE 517.05 CREDENTIALS OF MINISTER
 Ministers of any religious denomination, before they are authorized to solemnize a civil marriage, shall file a copy of their credentials of license or ordination or, if their religious denomination does not issue credentials, authority from the minister's spiritual assembly, with the local registrar of a county in this state, who shall record the same and give a certificate of filing thereof. The place where the credentials are recorded shall be endorsed upon and recorded with each certificate of civil marriage granted by a minister.

Choose One:
 I am qualified under M.S. 517.04 to perform marriages.
 I am qualified under M.S. 517.05 to perform marriages and attached credentials or a letter of good standing.
Choose One:
 My authority to perform marriages has no expiration date.
 My authority to perform marriages expires on _____.

Printed Name: _____
 Address: _____

 Phone: _____ Email: _____

I declare I am at least 21 years of age and eligible to solemnize a marriage: (initial here) _____
 Signature: _____

Proof of compliance with MS 517.04 and/or 517.05 has been filed in this office
 on the _____ day of _____, 20 _____.
 File number: _____

Amy Stenftenagel
 Washington County Recorder Deputy Signature: _____