



# 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 have attached my credentials.

**Choose One:**

☐ My authority to perform marriages has no expiration date.

☐ My authority to perform marriages expires on \_\_\_\_\_.

Print name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

I, the undersigned, hereby declare under oath that I have read the above Minnesota State Statutes and I declare the information provided to be true and correct.

Dated: \_\_\_\_\_ X \_\_\_\_\_  
(Signature of Officiant)

STATE OF MINNESOTA

COUNTY OF HOUSTON

The documentation you have presented, which you state is in compliance with MS 517.04 or MS 517.05, has been filed in this office on \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_ M.

File Number: \_\_\_\_\_

Michelle L. Werner – Houston County Recorder / Local Registrar

By: \_\_\_\_\_  
Recorder / Local Registrar \_\_\_\_\_ Chief Deputy \_\_\_\_\_ Deputy \_\_\_\_\_

## Filing Instructions

## In Person:

Need a valid government issued photo ID

### Sign Certificate of Filing in person at the Recorder's Office

Present credentials of license or ordination or letter of good standing if applicable (M.S. 517.05)

Houston County Recorder

304 S. Marshall Street Room 111

Caledonia MN 55921

### By Mail:

## Complete Certificate of Filing

Present credentials of license or ordination or letter of good standing if applicable (M.S. 517.05)

Filing Fee – Check is made payable to the Houston County Recorder

Houston County Recorder

304 S. Marshall Street Room 111

Caledonia MN 55921

<b>Fee and Payment Information</b>					
<b>Application Fee:</b>	\$100	<b>Registration Fee:</b>	\$50	<b>Exam Fee:</b>	\$150
<b>Retest Fee:</b>	\$75	<b>Material Fee:</b>	\$20	<b>Transportation Fee:</b>	\$30
<b>Travel Insurance:</b>	\$10	<b>Accommodation:</b>	\$80	<b>Meals:</b>	\$40
<b>Total Fees:</b>	\$375	<b>Payment Method:</b>	Credit Card / Bank Transfer	<b>Refund Policy:</b>	Full refund if cancelled 60 days prior.

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