

No.

AFFIDAVIT OF APPLICATION FOR MARRIAGE LICENSE

)
) ss.
)

We, the undersigned parties named in this affidavit, singularly and together, state that the following information is correct to the best of our knowledge and belief; that no legal objection to the marriage nor to the issuance of a license to authorize the same is known to us and hereby apply for license to marry.

PARTY 1 NAME <i>(last, first, middle)</i>			SOCIAL SECURITY NUMBER
NAME AFTER MARRIAGE <i>(last, first, middle)</i>			
RESIDENCE <i>(city or town)</i>	STATE	DATE OF BIRTH	BIRTHPLACE <i>(state or country)</i>
PARENT 1			BIRTHPLACE <i>(state or country)</i>
PARENT 2 (MAIDEN NAME)			BIRTHPLACE <i>(state or country)</i>
NUMBER OF THIS MARRIAGE <i>(1st, 2nd, etc)</i>	IF PREVIOUSLY MARRIED - LAST MARRIAGE ENDED BY		
	DEATH	DIVORCE	ANNULMENT
DATE LAST MARRIAGE ENDED	PLACE LAST MARRIAGE ENDED <i>(city and state)</i>		
PARTY 2 NAME <i>(last, first, middle)</i>			SOCIAL SECURITY NUMBER
NAME AFTER MARRIAGE <i>(last, first, middle)</i>			
RESIDENCE <i>(city or town)</i>	STATE	DATE OF BIRTH	BIRTHPLACE <i>(state or country)</i>
PARENT 1			BIRTHPLACE <i>(state or country)</i>
PARENT 2 (MAIDEN NAME)			BIRTHPLACE <i>(state or country)</i>
NUMBER OF THIS MARRIAGE <i>(1st, 2nd, etc)</i>	IF PREVIOUSLY MARRIED - LAST MARRIAGE ENDED BY		
	DEATH	DIVORCE	ANNULMENT
DATE LAST MARRIAGE ENDED	PLACE LAST MARRIAGE ENDED <i>(city and state)</i>		

COUPLE'S MAILING ADDRESS: