MARRIAGE LICENSE APPLICATION APPLICANT 1

Please Print

NAME				
FIRST	MIDDLE		LAST	JR./SR.
SOCIAL SECURITY NUMB	ER			
ADDRESS				
STREET/ROAD	C	CITY	STATE	ZIP CODE
COUNTY OF RESIDENCE		PHONE		
PLACE OF BIRTH				
CITY		COUNTY		STATE
BIRTHDATE				
MONTH	DAY	YEAR		AGE
FATHER'S FULL NAME				
FIRST		MIDDLE		LAST
MOTHER'S FULL NAME _				
FIRST		MIDDLE		LAST(MAIDEN
OCCUPATION		PREVIOUS	LY MARRIED	?
				YES/NO
IF YES, HOW MANY TIME	#DIVORCES #WII		DOWED	
NAMES AND AGES OF MI	NOR CHILDE	REN:		
NAMES AND NOES OF MI		NAME		AGE
NAME	AGE	NAME		AGE
NAME	AGE	NAME	W	AGE
EXPECTED DATE OF MAI	RRIAGE			
NAME OF PERSON PERFO	ORMING MA	RRIAGE		

MARRIAGE LICENSE APPLICATION APPLICANT 2

Please Print NAME ______ MIDDLE LAST JR./SR. SOCIAL SECURITY NUMBER ____ - ____-ADDRESS CITY STREET/ROAD STATE ZIP CODE COUNTY OF RESIDENCE PHONE - - -PLACE OF BIRTH CITY COUNTY STATE BIRTHDATE MONTH DAY YEAR AGE FATHER'S FULL NAME FIRST MIDDLE LAST MOTHER'S FULL NAME FIRST MIDDLE LAST(MAIDEN) OCCUPATION _____ PREVIOUSLY MARRIED? ____ IF YES, HOW MANY TIMES _____: #DIVORCES _____ #WIDOWED ____ NAMES AND AGES OF MINOR CHILDREN: _ AGE NAME AGE___ AGE NAME NAME AGE NAME AGE EXPECTED DATE OF MARRIAGE

NAME OF PERSON PERFORMING MARRIAGE