MARRIAGE LICENSE WORKSHEET

GROOM/SPOUSE

BRIDE / SPOUSE

| NAME (First) (Middle |) | (Last) | NAME (| First) | | (Middle) | | (Last) | |
|--|---|--------------------------------------|----------------------------|-----------------------------|---|----------------|--------------------------|-----------------------------|--|
| SEX DATE OF BIRTH (Mo., Day, Year) AGE | | AGE | SEX | DATE OF | Day, Year) | Year) AGE | | | |
| Discontinuo, D | ay, rear, | AGE | SEV | DATEO | BIRTH (INIO., | Day, real; | 701 | - | |
| BIRTHPLACE | | No. Yrs. Completed) ADES COLLEGE (1- | BIRTHPLA | ACE | | | N (No. Yrs. Co GRADES | ompleted) COLLEGE (1-5+) | |
| | 1-8 9-12 | | | | | | 3-12 | MILLEGE (1-0.) | |
| RESIDENCE (No. and Street) | | | RESIDENCE (No. and Street) | | | | | | |
| CITY OR TOWN | OR TOWN COUNTY STATE | | CITY OR TOWN | | | COUNTY STATE | | | |
| | SUPERVISION OR C | ONTROL BY | | | | SUPERVISION | VOR COM | NTROL BY | |
| GUARDIAN OR CONSERVATOR YES NO | | GUARDIAN OR CONSERVATOR YES NO | | | | | | | |
| FATHER'S NAME | | | FATHER'S NAME | | | | | | |
| | | | | | | | | | |
| MOTHER'S MAIDEN NAME | MOTHER' | MOTHER'S MAIDEN NAME | | | | | | | |
| | | | | | | | | | |
| FATHER'S BIRTHPLACE (State or | | LACE (State or | FATHER'S | BIRTHPLA | CE (State or | IMOTHER'S | BIRTHPL | ACE (State or | |
| Foreign Country) | Foreign Country) | (| Foreign Co | | (S. | Foreign Cou | | vien fairne : | |
| ı. | | | | | | | i. | | |
| NO. OF THIS NO. OF CIVIL | 21a. IF PREVIOUSLY I | IN MARRIAGE | NO. OF TH | is No. (| OF CIVIL | <u> </u> | USLY IN | MARRIAGE | |
| MARRIAGE UNIONS | OR CIVIL UNION, LAS | ST | MARRIAG | | NS | OR CIVIL UNIO | ON, LAST | | |
| , | RELATIONSHIP WAS 1. MARRIAGE 2. 2. | | ĺ | | | RELATIONSHI | P WAS | | |
| | 1. MARRIAGE 2. CIVIL UNION | | | | | | | | |
| LAST RELATIONSHIP ENDED BY: | | | | LAST RELATIONSHIP ENDED BY: | | | | | |
| 1. DEATH 2. DISSOLUTION 3. | 1. DEATH 2. ODISSOLUTION 3. ANNULMENT | | | | | | | | |
| 4. PREVIOUS CIVIL UNION DID N | 4. PREVIOUS CIVIL UNION DID NOT END: MARRYING CIVIL UNION | | | | | | | | |
| PARTNER | PARTNER | | | | | | | | |
| | | | | | | | ٠ | | |
| SOCIAL SECURITY # OF BRIDE/GRO | SOCIAL SECURITY # OF BRIDE/GROOM/SPOUSE | | | | | | | | |
| | | | | | | | | | |
| OFFICIATOR'S NAME & PHONE NUMBER | ₹: | J | <u>l.</u> | | . | | | | |
| | | | | | | | | | |
| DATE OF MARRIAGE CEREMONY: | | | | | - | | | | |
| | | | · | | | | | | |
| BRIDE/GROOM/SPOUSE EMAIL & PHONE | #: | | | | | | | | |
| · | | | | | | | | <u> </u> | |
| TOWN CLERK OFFICE USE O | NLY BELOW: | | | | | | | | |
| DATE APPLIED: | | EVDIDATION DAT | (65 Daye): | | le | | | | |
| ORIE OF FELDE | | EXPIRATION DAT | E (00 DATO). | | 13 | SSUE DATE: | | | |
| DATE PAID: AMOUNT OF FEE PAID (\$50 + CC'S): | | | | | P. | AYMENT TYPE: C | ASH/CHEC | K/CREDIT CARD | |
| | | | # | OF CC'S REQUES | STED; | | | | |
| IDENTIFICATION CHECKED: | · . | OATH GIVEN: | | | | \$20 EACH) | | | |
| | | | | | | | | | |
| DATE LICENSE RECEIVED: | | SIGNATURES: | | 1 | D | ATE CC'S MAILE | D: | | |
| MAILING ADDRESS FOR CC'S: | | | | | | | | | |