



## APPLICATION / WORKSHEET FOR MARRIAGE LICENSE

<b>License type applied for (CHECK ONE):</b> <input type="checkbox"/> Public (\$68.00) <input type="checkbox"/> Confidential (\$76.00)  <b>The person performing the ceremony will be (CHECK ONE):</b> <input type="checkbox"/> Judge  <input type="checkbox"/> Clergy Person (Minister, Priest, Rabbi, etc.) <input type="checkbox"/> Deputy Commissioner of Marriages  <input type="checkbox"/> Denomination without Clergy: Buddhist, Muslim, Bahai, Wiccan, etc.  <b>Date of Ceremony</b> _____ <b>City of Ceremony</b> _____	<b>Clerk's Use Only</b>  <b>M/L#</b> _____  <b>RCPT#</b> _____  <b>POA</b> <input type="checkbox"/>  <small>(Send Original to Records Coordination Desk)</small>
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### PLEASE PRINT CLEARLY

<b>CLERK'S USE ONLY</b> <b>DRIVER'S LICENSE / IDENTIFICATION NO:</b> <b>ISSUE DATE:</b> <b>EXPIRATION DATE:</b>	<b>CLERK'S USE ONLY</b> <b>DRIVER'S LICENSE / IDENTIFICATION NO:</b> <b>ISSUE DATE:</b> <b>EXPIRATION DATE:</b>
<b>APPLICANT A'S PERSONAL DATA</b>	<b>APPLICANT B'S PERSONAL DATA</b>
Full First Name: (Do not use Nick-Name)	Full First Name: (Do not use Nick-Name)
Middle Name:	Middle Name:
Current Last Name:	Current Last Name:
Last Name at Birth (if different than current):	Last Name at Birth (if different than current):
Date of Birth:	Date of Birth:
State of Birth (if outside U.S., enter COUNTRY):	State of Birth (if outside U.S., enter COUNTRY):
Number of Previous Marriages/SRDP (state registered domestic partnership):	Number of Previous Marriages/SRDP (state registered domestic partnership):
Last Marriage Ended By: <input type="checkbox"/> Death <input type="checkbox"/> Dissolution <input type="checkbox"/> Annulment <input type="checkbox"/> Term SRDP <input type="checkbox"/> N/A	Last Marriage Ended By: <input type="checkbox"/> Death <input type="checkbox"/> Dissolution <input type="checkbox"/> Annulment <input type="checkbox"/> Term SRDP <input type="checkbox"/> N/A
Date Last Marriage/SRDP Ended:	Date Last Marriage/SRDP Ended:
Father/Parent's Full Legal Name (Birth Name): (Do not use Nick-Name)	Father/Parent's Full Legal Name (Birth Name): (Do not use Nick-Name)
State of Birth (if outside U.S., enter COUNTRY):	State of Birth (if outside U.S., enter COUNTRY):
Mother/Parent's Full Legal Name (Birth Name): (Do not use Nick-Name)	Mother/Parent's Full Legal Name (Birth Name): (Do not use Nick-Name)
State of Birth (if outside U.S., enter COUNTRY):	State of Birth (if outside U.S., enter COUNTRY):
Applicant A's Address (Number & Street or P.O. BOX):	Applicant B's Address (Number & Street or P.O. BOX):
City: _____ State: _____	City: _____ State: _____
Zip: _____ County: _____	Zip: _____ County: _____
Daytime Phone # for Applicant A:	Daytime Phone # for Applicant B:
<b>Clerk's Use Only</b> <input type="checkbox"/> Reviewed By: _____ <input type="checkbox"/> Entered By: _____ <input type="checkbox"/> Cashiered & Sworn In By: _____ <input type="checkbox"/> Ceremony Performed By: _____	