MARRIAGE INFORMATION SHEET

	Office Use Only			
Marriage Application No				
Amount Received:	Pre-Marital Counseling:	YesNo		
<u>GROOM'S INFORMATION</u> Important Note: The information found on the ID (driver's license, passport etc.) you present MUST match t information entered for name. Misspellings on any form of ID must be corrected before we can accept it for t license.				
Full Name:				
First City:	Middle County:	Last State:		
Social Security Number or Passport N	umber:			
State of Birth:	Date of Birth:			
Race: White () Black () Driental/Asian () Other (-) American Indian ()		
Number of this Marriage: L	ast Marriage ended in: Divorce() Death() Annulment ()		
Last Marriage Ended on: (Month)	(Day)	(Year)		
Important Note: The information found information entered for name. Misspellin license. Full Name:	ngs on any form of ID must be cor	ort etc.) you present MUST match		
Maiden Name:	Social Security # or Pass	port #		
City:	County:	State:		
State of Birth:	Date of Birth:			
Race: White () Black () D Oriental/Asian () Other (-) American Indian ()		
Number of this Marriage: L	ast Marriage ended in: Divorce() Death() Annulment ()		
Last Marriage Ended on: (Month)	(Day)	(Year)		
Mailing Address:	Phone:			

STATE OF FLORIDA COUNTY OF WAKULLA Marriage Application Number:_____

PRINT First, Middle, Last Name of GROOM

PRINT First, Middle, Last Name of BRIDE

DO HEREBY SWEAR AND AFFIRM THAT THE INFORMATION GIVEN ON THE AFFIDAVIT IS THE TRUTH.

No County Court Judge of Clerk of the Circuit Court in this State shall issue a license for the marriage of any person unless there shall be first presented and filed with him an affidavit in writing, signed by both parties – to the marriage, providing the social security number of each party, made and subscribed before some person authorized by law to administer an oath. Pursuant to the Federal Personal Responsibility and Work Opportunity Reconciliation Act of 2996, each party is required to provide his or her social security number in accordance with this section. Disclosure of social security numbers obtained through this requirement shall be limited to the purpose to administration of Title IV-D Program for child Support Enforcement.

Signature GROOM	Social Security Number Required by F.S. 741.04
Signature BRIDE	Social Security Number Required by F.S. 741.04
By: Deputy Clerk	
Printed Name of Deputy Clerk	
Personally KnownProduced ID	GROOM
Personally KnownProduced ID	BRIDE
MARRIAGE LICENSE EXPIRES 60 DAYS FR	NOTICE OM ISSURANCE. IF YOU DO NOT MARRY

MARRIAGE LICENSE EXPIRES 60 DAYS FROM ISSURANCE. IF YOU DO NOT MARRY WITHIN THIS PERIOD (60 DAYS), YOU WILL BE REQUIRED TO PURCHASE ANOTHER LICENSE. NO REFUNDS OR EXTENSIONS ARE PERMITTED.

LICENSE EXPIRES ON:_____

Marriage Application No.:				
Groom:				
Bride:				
We have attested that we: Have completed the marriage preparation course. Have obtained and read or otherwise accessed the information contained in the handbook or other electronic media presentation of the rights and responsibilities of the parties to a marriage specified in section 741.0306, Florida Statutes.				
Grooms' Signature:				
Bride's Signature:				
STATE OF FLORIDA COUNTY OF WAKULLA				
Sworn to and subscribed before me this day of 2	20			

By: Deputy Clerk

Printed Name of Deputy Clerk