

COUNTY OF BUCKS

ADDRESS

MARRIAGE LICENSE APPLICATION

DUPLICATE RETURNED

VOL

NO

1. COUNTY ISSUING LICENSE BUCKS			4. OFFICIANT A. NAME		
2. PLACE OF MARRIAGE (City, Boro, Township) (County)			B. TITLE		
3. DATE OF MARRIAGE (Month, Day Year)			C. DENOMINATION		
STATEMENT OF MALE			STATEMENT OF FEMALE		
5. FULL NAME			25. FULL NAME		25a. MAIDEN NAME
6. MAILING ADDRESS			26. MAILING ADDRESS		
7. RESIDENCE A. STATE / ZIP CODE		B. COUNTY	27. RESIDENCE A. STATE / ZIP CODE		B. COUNTY
C. LOCATION			C. LOCATION		
8. OCCUPATION		9. SS	28. OCCUPATION		28 SS
10. DATE OF BIRTH		11. BIRTHPLACE	30. DATE OF BIRTH		31. BIRTHPLACE
12A. PRIOR MARRIAGES	12B. HOW DISSOLVED	12C. DATE	32A. PRIOR MARRIAGES	32B. HOW DISSOLVED	32C. DATE
13. COURT, IF DIVORCED			33. COURT, IF DIVORCED		
13A. CAUSE, IF DIVORCED			33A. CAUSE, IF DIVORCED		
14. DOES THE APPLICANT HAVE ANY TRANSMISSIBLE DISEASE? YES <input type="checkbox"/> NO <input type="checkbox"/>			34. DOES THE APPLICANT HAVE ANY TRANSMISSIBLE DISEASE? YES <input type="checkbox"/> NO <input type="checkbox"/>		
15. FATHER'S FULL NAME			35. FATHER'S FULL NAME		
16. FATHER'S RESIDENCE			36. FATHER'S RESIDENCE		
17. FATHER'S BIRTHPLACE			37. FATHER'S BIRTHPLACE		
18. FATHER'S OCCUPATION			38. FATHER'S OCCUPATION		
19. MOTHER'S FULL NAME			39. MOTHER'S FULL NAME		
20. MOTHER'S MAIDEN NAME			40. MOTHER'S MAIDEN NAME		
21. MOTHER'S RESIDENCE			41. MOTHER'S RESIDENCE		
22. MOTHER'S BIRTHPLACE			42. MOTHER'S BIRTHPLACE		
23. MOTHER'S OCCUPATION			43. MOTHER'S OCCUPATION		
24. DOES THE APPLICANT SATISFY ALL THE PROVISIONS IN PENNSYLVANIA'S MARRIAGE LAWS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			44. DOES THE APPLICANT SATISFY ALL THE PROVISIONS IN PENNSYLVANIA'S MARRIAGE LAWS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		

WE, THE UNDERSIGNED, EACH OF US DO SOLEMNLY SWEAR THE FACTS SET FORTH ARE TRUE AND ACCURATE TO THE BEST OF OUR KNOWLEDGE AND BELIEF AND DO HEREBY MAKE APPLICATION TO THE CLERK OF ORPHANS' COURT DIVISION OF THE COURT OF COMMON PLEAS OF BUCKS COUNTY, PENNSYLVANIA, FOR LICENSE TO MARRY.

SIGNATURE OF MALE APPLICANT _____

SIGNATURE OF FEMALE APPLICANT _____

SWORN AND SUBSCRIBED TO BEFORE ME THIS 11 DAY OF FEBRUARY, A.D., 2004

OFFICIAL'S SIGNATURE _____
OFFICIAL'S TITLE Clerk of Orphans' Court
OFFICIAL'S COMMISSION EXPIRES _____
DATE FILED _____ DATE LICENSE ISSUED _____
DELIVER _____