

TYPE/PRINT
IN
PERMANENT
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OREGON DEPARTMENT OF HUMAN SERVICES
HEALTH DIVISION
CENTER FOR HEALTH STATISTICS
APPLICATION, LICENSE, AND RECORD OF MARRIAGE

Local File Number

136-

State File Number

LICENSE EFFECTIVE
ON OR AFTER

COUNTY _____

GROOM	1. GROOM'S NAME		First	Middle	Last
	2. BIRTHPLACE (State or Foreign Country)		3. DATE OF BIRTH (Month, Day, Year)		4. AGE
	5. SEX	6. OCCUPATION			7. PREVIOUS MARITAL STATUS (Single, Widowed, Divorced)
	8a. FATHER'S NAME (First, Middle, Last)			8b. BIRTHPLACE (State or Foreign Country)	
	9a. MOTHER'S NAME (First, Middle, Maiden Surname)			9b. BIRTHPLACE (State or Foreign Country)	
	10. GROOM'S ADDRESS				
	Street and Number				
	City or Town				
	County				
	State				
	Zip				
11. If affidavit is required as proof of age, the name and address of the affiant.					
Name: _____ Address: _____					
BRIDE	12a. BRIDE'S NAME		First	Middle	Last
	12b. MAIDEN SURNAME (If Different)		12c. PREVIOUS NAME (If Different)		
	13. BIRTHPLACE (State or Foreign Country)		14. DATE OF BIRTH (Month, Day, Year)		15. AGE
	16. SEX	17. OCCUPATION			18. PREVIOUS MARITAL STATUS (Single, Widowed, Divorced)
	19a. FATHER'S NAME (First, Middle, Last)			19b. BIRTHPLACE (State or Foreign Country)	
	20a. MOTHER'S NAME (First, Middle, Maiden Surname)			20b. BIRTHPLACE (State or Foreign Country)	
	21. BRIDE'S ADDRESS				
	(Street and Number)				
	City or Town				
	County				
	State				
Zip					
22. If affidavit is required as proof of age, the name and address of the affiant.					
Name: _____ Address: _____					
SIGNATURES	WE HEREBY CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF AND THAT WE ARE FREE TO MARRY UNDER THE LAWS OF THIS STATE.				
	23. GROOM'S LEGAL SIGNATURE		24. BRIDE'S LEGAL SIGNATURE		
LICENSE TO MARRY	NEITHER YOU NOR YOUR SPOUSE IS THE PROPERTY OF THE OTHER. THE LAWS OF THE STATE OF OREGON AFFIRM YOUR RIGHT TO ENTER INTO MARRIAGE AND AT THE SAME TIME TO LIVE WITHIN THE MARRIAGE FREE FROM VIOLENCE AND ABUSE.				
	This License Authorizes the Marriage in this State of the Parties Named Above by Any Person Duly Authorized to Perform a Marriage Ceremony Under the Laws of the STATE OF OREGON.			25. LICENSE EXPIRES (Month, Day, Year)	
	26. DATE LICENSE ISSUED		27. SIGNATURE OF ISSUING OFFICIAL		28. TITLE OF ISSUING OFFICIAL
	29. I CERTIFY THAT THE ABOVE NAMED PERSONS WERE MARRIED ON - MONTH, DAY, YEAR/TIME		30a. WHERE MARRIED - CITY, TOWN/LCATION		30b. COUNTY
CEREMONY	31a. SIGNATURE OF PERSON PERFORMING CEREMONY		31b. NAME (Type/Print)		31c. TITLE
	31d. COUNTY WHERE AUTHORITY IS RECORDED		31e. ADDRESS OF PERSON PERFORMING CEREMONY		
	32. WITNESS NAME AND FULL ADDRESS		33. WITNESS NAME AND FULL ADDRESS		
	34. SIGNATURE OF COUNTY CLERK OR DIRECTOR		35. DATE FILED BY LOCAL OFFICIAL (Month, Day, Year)		

APPLICANT(S) MUST WRITE IN THESE LINES-OFFICIAL USE ONLY

36. GROOM'S SOCIAL SECURITY NUMBER (specify #, none, unknown) 37. BRIDE'S SOCIAL SECURITY NUMBER (specify #, none, unknown)

ORS 432.010

REQUIRED STATISTICAL INFORMATION: THE INFORMATION BELOW WILL NOT APPEAR ON CERTIFIED COPIES OF THE RECORD.

38. NUMBER OF THIS MARRIAGE - First, Second, etc. (Specify below)	39. IF PREVIOUSLY MARRIED, LAST MARRIAGE ENDED (Specify below) By Death, Divorce, Dissolution or Annulment (Specify below)	Date (Month, Day, Year)	40. RACE - OPTIONAL, American Indian, Black, White, etc. (Specify below)	41. EDUCATION (Specify below highest grade completed)	
				Elementary/Secondary (0-12)	College (1-4 or 5+)
38a	39a	39b	40a	41a	
38b	39c	39d	40b	41b	

GROOM
BRIDE

ORIGINAL VITAL RECORDS COPY

THE AUTHORIZED PERSON PERFORMING THIS MARRIAGE IS REQUIRED TO RETURN THE ORIGINAL COPY OF THIS FORM TO THE COUNTY CLERK WITHIN TEN (10) DAYS FOLLOWING THE DATE OF THE MARRIAGE.