



## Affidavit for Marriage License State of WASHINGTON, Stevens County

I, the undersigned, do solemnly swear or affirm, that the information on this form is true; and that I am eighteen years of age or older or if not, have parental or guardian consent, or a court wavier attached. I am not afflicted with any contagious sexually transmitted diseases, or if I am aware that I am afflicted with any contagious sexually transmitted diseases, the condition is known to the other applicant. I am not related to the other applicant. I am not registered under a Domestic Partnership. I understand that this marriage license is not valid for three (3) days from the date of application and is void if the marriage is not solemnized in the State of Washington within sixty (60) days of issuance of license.

### Person A

Bride       Groom       Spouse

- I am eighteen years of age or older.  
 I am at least seventeen years of age and my parent's or guardian's written consent for this marriage accompanies this application.

Name  
First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Male       Female      Birth Name: \_\_\_\_\_

Single       Widowed       Divorced       Under Control of Guardian      Phone Number: \_\_\_\_\_  
Current Address  
Number and Street: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Place: \_\_\_\_\_ If not USA give Country: \_\_\_\_\_  
Previous Address (Past 6 months)

Number and Street: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Mother's Name (First/Middle/MaidenName): \_\_\_\_\_ Birth State/Country: \_\_\_\_\_

Father's Name (First/Middle/Last): \_\_\_\_\_ Birth State/Country: \_\_\_\_\_

Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Deputy Auditor/Notary \_\_\_\_\_

### Person B

Bride       Groom       Spouse

- I am eighteen years of age or older.  
 I am at least seventeen years of age and my parent's or guardian's written consent for this marriage accompanies this application.

Name  
First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Male       Female      Birth Name: \_\_\_\_\_

Single       Widowed       Divorced       Under Control of Guardian      Phone Number: \_\_\_\_\_  
Current Address  
Number and Street: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Place: \_\_\_\_\_ If not USA give Country: \_\_\_\_\_  
Previous Address (Past 6 months)

Number and Street: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Mother's Name (First/Middle/MaidenName): \_\_\_\_\_ Birth State/Country: \_\_\_\_\_

Father's Name (First/Middle/Last): \_\_\_\_\_ Birth State/Country: \_\_\_\_\_

Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Deputy Auditor/Notary \_\_\_\_\_

I hereby certify that on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ I issued a marriage license in accordance with the above affidavits.

Lori Larsen, Stevens County Auditor \_\_\_\_\_ Deputy.

Date of Application \_\_\_\_\_ Date License Issued: \_\_\_\_\_ License No.: \_\_\_\_\_



**Affidavit for Marriage License  
State of WASHINGTON, Stevens County**

**Social Security Number for Applicants**

Department of Health is required to collect your Social Security Number in order to assist in child support laws (Section 7, Chapter 160 Laws of 1998). If you do not have a Social Security Number, you are required to complete the Social Security Declaration.

Person A Name

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Person B Name

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

**Declaration in Absence of a Social Security Number**

*I have not furnished a Social Security Number on my application for registration of a marriage certificate, because  
**I do not have a Social Security Number.***

*I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.*

**Person A Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Person B Signature** \_\_\_\_\_ **Date** \_\_\_\_\_