

TYPE/PRINT IN PERMANENT BLACK INK.		OREGON DEPARTMENT OF HUMAN SERVICES CENTER FOR HEALTH STATISTICS 136-			State File Number	
Local File Number		<b>APPLICATION, LICENSE, AND RECORD OF MARRIAGE</b>				
LOCAL OFFICIAL	COUNTY _____		LICENSE EFFECTIVE ON OR AFTER _____			
GROOM	1. GROOM'S NAME First Middle Last					
<input type="checkbox"/> <input type="checkbox"/> CONSENT FORM WAIVER	2. BIRTHPLACE (State or Foreign Country)		3. DATE OF BIRTH (Month, Day, Year)		4. AGE (18 or older, 17 with consent)	
	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					
<input type="checkbox"/> <input type="checkbox"/> CONSENT FORM WAIVER	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 (18 or older, 17 with consent)	
	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			
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.						
LICENSE TO MARRY	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)		
APPLICANT - DO NOT WRITE BETWEEN THESE LINES - OFFICIAL USE ONLY	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		30a. WHERE MARRIED - CITY, TOWN/LOCATON		30b. COUNTY	
			<b>OREGON</b>			
	31a. SIGNATURE OF PERSON PERFORMING CEREMONY		31b. NAME (Type/Print)		31c. TITLE	
	31d. NAME /ADDRESS OF OFFICIANT'S AUTHORIZING RELIGIOUS CONGREGATION/ORGANIZATION		31e. ADDRESS AND PHONE NUMBER OF PERSON PERFORMING CEREMONY			
CEREMONY	32. WITNESS NAME		33. WITNESS NAME			
LOCAL OFFICIAL	34. SIGNATURE OF COUNTY CLERK OR DIRECTOR			35. DATE FILED BY LOCAL OFFICIAL (Month, Day, Year)		
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)		40. RACE - OPTIONAL, American Indian, Black, White, etc. (Specify below)		
		Date (Month, Day, Year)		41. EDUCATION (Specify below highest grade completed)		
				Elementary/Secondary College (1-4 or 5+)		
GROOM	38a.	39a.	39b.	40a.	41a.	
BRIDE	38b.	39c.	39d.	40b.	41b.	
THE AUTHORIZED PERSON PERFORMING THIS MARRIAGE IS REQUESTED TO RETURN THE ORIGINAL COPY OF THIS FORM TO THE COUNTY CLERK WITHIN TEN (10) DAYS FOLLOWING THE DATE OF THE MARRIAGE. A PENALTY MAY BE ASSESSED AFTER 35 DAYS. (ORS 106.990)						