State of Connecticut Department of Public Health MARRIAGE LICENSE WORKSHEET

SPOUSE O	NE			SPOUSE	₹ <i>Τ</i> ₩Ο			
NAME (First)	(Middle)	(1	_ast)	NAME (First)	(Midd	ile)	(Last)	
							·	
SEX DA	X DATE OF BIRTH (Mo., Day, Year) AGE		AGE	SEX DATE OF BIRTH (Mo., Day, Year)		AGE		
BIRTHPLACE		EDUCATION (No. Yrs. Compl		BIRTHPLACE		EDUCATION (No. Yrs Grades 1-8 Grad	es 9-12 College (1-5+)	
		Grades 1-8 Grades 9-12	College (1-5+)			Grades 1-6 Grad	es 9-12 College (1-5+)	
RESIDENCE (No. and Street)				RESIDENCE (No. and Street)				
NEOIDENGE (No. and offeet)				TAZOBZINOZ (NO. and zaroży)				
-								
CITY OR TOWN		COUNTY	STATE	CITY OR TO	MN	COUNTY	STATE	
					16			
CLIDED/(ICION O	D CONTROL BY C	L UARDIAN OR CONSER'	VATOR	SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR				
	ES NO	DANDIAN ON CONSER	VATOR	Circle one: YES NO				
				FATHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE)				
FATHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE)				FATHER PARENT WANTE (LAST NAME I NOT TO THAT WANTE (LAST NAME)				
EATHER/DARFIT DIRTURN AGE				FATHER/PARENT BIRTHPLACE MOTHER/PARENT BIRTHPLACE				
FATHER/PARENT BIRTHPLACE (State or Foreign Country) MOTHER/PARENT BIRTHPLACE (State or Foreign Country)				(State or Foreign Country) (State or Foreign Country)				
(State of Foreign Country)				(, , , , , , , , , , , , , , , , , , ,				
MOTHER/DADENT MAME (MITTHE ACT MAME PRIOR TO (ST MARRIAGE) A					MOTHER/PARENT NAME (WITH LAST NAME PRIOR TO 1ST MARRIAGE)			
MOTHER/PARENT NAME (WITH LAST NAME PRIOR TO 15T MARRIAGE)					MENT NAME (VIII)	LAST NAME I NON	TO I WARRINGE)	
NO 05 THO	1 10 05 01 (1)	IE DDEVIOUGLY IN MADD	IACE OR CIVIL	NO. OF THIS	NO. OF CIVIL	IF PREVIOUSLY IN MA	ARRIAGE OR CIVIL	
NO. OF THIS MARRIAGE	LINION LAGE DELATIONOLUD MAG.			MARRIAGE LINIONS UNION, LAST RELATIONSHIP WAS:				
WANTAGE	(CIRCLE ONE)			(CIRCLE ONE)				
		 MARRIAGE CIVIL UNION 				1. MARRIA		
LACT DELATIONS	SHIP ENDED BY:			LAST PELAT	TONSHIP ENDED B	L		
	DISSOLUTION	3. ANNULMENT	LAST RELATIONSHIP ENDED BY: (CIRCLE ONE) 1. DEATH 2. DISSOLUTION 3. ANNULMENT					
4. PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION				4. PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION				
PARTNER				PARTNER				
SOCIAL SECURITY # SPOUSE ONE				SOCIAL SECURITY # OF SPOUSE TWO				
SOCIAL SECONTT # SPOUSE ONE								
Location of Marriage Ceremony: Date of Wedding:								
Location of We	inage Ceremon	<u>1y</u> .		<u> </u>				
OFFICIATOR'S NAME (FIRST) (LAS						(TITLE)		
CITION (I OIL (I III OI)						(
					•			
OFFICIATOR'S A	DDDESS			OFFICIATOR'S PHONE				
OFFICIATOR'S ADDRESS OF					STROWNSTONE			
SPOUSE ONE PHONE:					SPOUSE TWO PHONE:			
#Cert Copies requ	losted (\$20 sash).	Addra	ss to mail to:				Date Mailed:	
#Gert Gobies requ	icoteu (420 each):	Addres	ss to man to.				3410 manou.	