

TYPE/PRINT  
IN  
PERMANENT  
BLACK INK.

OREGON DEPARTMENT OF HUMAN SERVICES 136-  
HEALTH DIVISION  
CENTER FOR HEALTH STATISTICS  
APPLICATION, LICENSE, AND RECORD OF MARRIAGE

Local File Number

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	25. LICENSE EXPIRES (Month, Day, Year)					
	This License Authorizes the Marriage in this State of the Parties Named Above by Any Person Only Authorized to Perform a Marriage Ceremony Under the Laws of the STATE OF OREGON.					
	26. DATE LICENSE ISSUED			27. SIGNATURE OF ISSUING OFFICIAL		
CEREMONY	29. I CERTIFY THAT THE ABOVE NAMED PERSONS WERE MARRIED ON - MONTH, DAY, YEAR/TIME		30a. WHERE MARRIED - CITY, TOWN/LOCATON		30b. COUNTY	
	OREGON					
	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		
LOCAL OFFICIAL	34. SIGNATURE OF COUNTY CLERK OR DIRECTOR				35. DATE FILED BY LOCAL OFFICIAL (Month, Day, Year)	

APPLICANTS DO NOT WRITE BETWEEN 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)		40. RACE - OPTIONAL, American Indian, Black, White, etc. (Specify below)
	By Death, Divorce, Dissolution or Annulment (Specify below)		
38a	39a	39b	40a
38b	39c	39d	40b
41. EDUCATION (Specify below highest grade completed)		41. EDUCATION (Specify below highest grade completed)	
Elementary/Secondary (0-12)		College (1-4 or 5+)	
41a		41b	

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.