COPY Health Authority

LOCAL OFFICIA	OCAL FICIAL PARTY A is (check and): Groom Ridge			ON, LICENSE, AND RECOR			License expires (month, day, year):		
				Spouse					
ARTY A:	la. Current legal name: First			Middle			Last		
ride or oouse	1b. Full legal name at birth (if different):				1c. Previo	us full name	(if different):	· · · · · · · · · · · · · · · · · · ·	
	2. Birthplace (state or foreign country):				3. Date of birth (month		h, day, year): 4. Age:		
.	5. Sex:	6. Occupation:				7 Previo	us marital statu	s (single, widowed, divor	rced).
FORM	0. 0		1	City or town					
CONSENT FORM WAIVER PARTY					State/c	ountry	ZIP	8b. COUNTY of resid	dence:
CONS	9. Legal name tak	en after this marri	age: First	Middle	· · · · · · · · · · · · · · · · · · ·		Last		
	10a. Father's/Par	10a. Father's/Parent's name (first, middle, last name at pa			it parent's birth): 10b. Birth		place (state or foreign country):		
	11a. Mother's/Par	rent's name (first, r	niddle, last n	ame at parent's birth)	:	11b. Birt	hplace (state or	foreign country):	
DTV D	PARTY B is (ch	eck one): Groot	m 🔲 Bride	Spouse					
ARTY B: room, ride or	12a. Current lega	l name: First		Middle			Last		
ouse	12b. Full legal na	me at birth (if diffe	rent):		12c. Previous full name (if different):				
	13. Birthplace (sta	ate or foreign coun	try):		14. Date o	f birth (mon	th, day, year):	15. Age:	
KM KM	16. Sex:	17. Occupation:			<u> </u>	18. Previ	ous marital statu	ıs (single, widowed, divo	orced):
T FOF	19a. Current addi	ress: Street and nur	nber	City or town	State/c	ountry	ZIP	19b. COUNTY of res	idence
CONSENT FORM WAIVER PARTY B	20. Legal name to	aken after this mar	riage: First	Middle			Last		
8 ≥ □	21a. Father's/Pare	ent's name (first. m	iddle. last na	me at parent's birth):		21b Birtl	hplace (state or	foreign country):	
	22a. Mother's/Parent's name (first, middle, last n			·		22b. Birthplace (state or foreign country):			
	ZZa. Wiother s/Fas	tent's name (jirsi, r	maaie, iasi n	ame ai pareni s virin)		220. Birt	npiace (state or	joreign countryj:	
FFIDAVIT OF AGE		name and address							
uired if 17)	24. Party B –	name and address	s of affiant: _		1	•			
NATURES	WATE 12 10 10 10 10 10 10 10 10 10 10 10 10 10					o s legal sig	rature:		
					<u>+</u>				
	leither you nor t the same time	to live		f the other. The laws ee from violence and	he State of O use.	regon affiri	n your right to	enter in Lage an	d
ENSE TO		norizes the marria f the State of Ores		ate of the parties nan	above by any	y person du	y authori	erform a marriage ce	eremo
	7. Date license i	ssued:	28. Signatur	official:		29. Ti	mg officia	ıl:	
REMONY	0a. Date of mari	iage:	30b. Where	married (city, tow.	"ion).	ouc. Cour	nty:		
·	ultar the same of	the above named p	persons were	married on the d	pove (O	RE
	*	Signature of person performing ceremony (officiant):							
	c. Officiant (per Name:	rson performing ce	remony);		Phone:				
	Address:				City, State	e, ZIP:			
	. Name of aut	gregation/organization	ficiant:						
	Witness , rint):				1 00 777	ss name (pri			

	ORS 432.010 required statistical information: The information below will not appear on the certified copies of the record.									
	36. Party A's Social Se	ecurity number (specify number, non	ne or unknown):	37. Party B's Social Security number (specify number, none or unknown):						
	38. Number of this marriage — first, second, etc. (specify below):	39. If previously married, the date a marriage ended:	and reason the last	Race — OPTIONAL sh as Asian, American	41. Education (specify the highest grade completed):					
		By death, divorce, dissolution or annulment (specify below):	Date (month, day, year):	(sp. slow):	Elementary/ College Secondary (0-12): (1-4 or 5+):					
PARTY A	38a.	39a.	39b.	40a.	41a.					
PARTY B	38b.	39c.	39d.	406	41b.					