

WORK SHEET FOR PREPARATION OF MARRIAGE LICENSE FORM

LICENSE NUMBER

COUNTY

1. MALE APPLICANT—NAME	FIRST		MIDDLE			LAST				
2a. RESIDENCE—STATE		2b. COUNTY		2c. CITY, TOWN, OR LOCATION			2d. INSIDE CITY LIMITS (Specify Yes Or No)			
2e. STREET AND NUMBER			3. BIRTHPLACE (COUNTY & STATE)		4a. DATE OF BIRTH (Month, Day, Year)		4b. AGE			
5a. FATHER—NAME			5b. STATE OF BIRTH		5c. ADDRESS (If Living)					
6a. MOTHER—MAIDEN NAME			6b. STATE OF BIRTH		6c. ADDRESS (if Living)					
7. RACE (Optional)	8. NUMBER OF THIS MARRIAGE FIRST, SECOND, ETC. (Specify)		IF PREVIOUSLY MARRIED			10. EDUCATION—SPECIFY HIGHEST GRADE COMPLETED				
			9a. LAST MARRIAGE ENDED BY: Death, Divorce, Or Annulment (Specify)		9b. DATE MONTH YEAR		ELEMENTARY (0, 1, 2, 3, 4, ... or 8)	HIGH SCHOOL (1, 2, 3, or 4)	COLLEGE 1, 2, 3, 4, or 5)	
11a. FEMALE APPLICANT—NAME			FIRST		MIDDLE			LAST		11b. MAIDEN SURNAME (If Different)
12a. RESIDENCE—STATE		12b. COUNTY		12c. CITY, TOWN, OR LOCATION			12d. INSIDE CITY LIMITS (Specify Yes Or No)			
12e. STREET AND NUMBER			13. BIRTHPLACE (COUNTY & STATE)		14a. DATE OF BIRTH (Month, Day, Year)		14b. AGE			
15a. FATHER—NAME			15b. STATE OF BIRTH		15c. ADDRESS (If Living)					
16a. MOTHER—MAIDEN NAME			16b. STATE OF BIRTH		16c. ADDRESS (if Living)					
17. RACE (Optional)	18. NUMBER OF THIS MARRIAGE FIRST, SECOND, ETC. (Specify)		IF PREVIOUSLY MARRIED			20. EDUCATION—SPECIFY HIGHEST GRADE COMPLETED				
			19a. LAST MARRIAGE ENDED BY: Death, Divorce, Or Annulment (Specify)		19b. DATE MONTH YEAR		ELEMENTARY (0, 1, 2, 3, 4, ... or 8)	HIGH SCHOOL (1, 2, 3, or 4)	COLLEGE 1, 2, 3, 4, or 5)	

DHHS 1607 (Revised 5/05) Vital Records

N.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES

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