Affidavit of Applicant A Must be filled in by Applicant A Applicant A Applicant for Marriage License State of WASHINGTON Birthdate Age County of Benton Print Name in Full Birthplace The undersigned, being first duly sworn, deposes as follows: ☐ Single ☐ Widowed ☐ Divorced Χ That if I am afflicted with any contagious ☐ Under Control Signature in Full sexually transmitted disease, the condition of Guardian is known to Applicant B and that I am not Address Subscribed and Sworn to before me on related to Applicant B. (present) day month vear Marriage license is not valid for three (3) City State Zip days from date of application and is void if Address marriage is not solemnized in the State of (Past 6 Months) Street Washington within sixty (60) days of Deputy Auditor/Notary Public issuance of license. City State Zip Applicant B Affidavit of Applicant B Must be filled in by Applicant B Applicant for Marriage License State of WASHINGTON Birthdate Age County of Benton Print Name in Full Birthplace The undersigned, being first duly sworn, deposes as follows: ☐ Single ☐ Widowed ☐ Divorced That if I am afflicted with any contagious ☐ Under Control Signature in Full of Guardian sexually transmitted disease, the condition is known to Applicant A and that I am not Subscribed and Sworn to before me on Address related to Applicant A. Street (present) month day vear Marriage license is not valid for three (3) City State days from date of application and is void if Address marriage is not solemnized in the State of (Past 6 Months) Street Washington within sixty (60) days of Deputy Auditor/Notary Public issuance of license. City State Zip Parents' or Guardians' Consent **Applicant B Applicant A** I hereby certify that I am (Parent-Guardian) of I hereby certify that I am (Parent-Guardian) of Subscribed and Sworn to before me on ___ years of age and give my full __ years of age and give my full Who is day month vear consent to their marriage to consent to their marriage to Deputy Auditor/Notary Public Χ

Date of Application Date License Valid Marriage License No.

Signature Parent/Guardian of Applicant B

Signature Parent/Guardian of Applicant A