

**SUPERIOR COURT OF ARIZONA
MOHAVE COUNTY**

In the matter of the Application of:

AFFIDAVIT FOR MARRIAGE LICENSE

MALE

STATE OF ARIZONA)
COUNTY OF MOHAVE)

I, _____, being first duly sworn upon my oath, do depose and declare that: _____, is my true name; that my age is _____ years; that my date of birth is: _____; that I reside at: _____; that I am not related to the female listed below; and that I understand that information on sexually transmitted diseases is available from the County Health Department on request and that these diseases may be transmitted to my unborn child.

Male's signature: _____

Subscribed and sworn before me this _____ day of _____, 20_____

My commission expires: _____
Notary Public/Deputy Clerk

FEMALE

STATE OF ARIZONA)
COUNTY OF MOHAVE)

I, _____, being first duly sworn upon my oath, do depose and declare that: _____, is my true name; that my age is _____ years; that my date of birth is: _____; that I reside at: _____; that I am not related to the male listed above; and that I understand that information on sexually transmitted diseases is available from the County Health Department on request and that these diseases may be transmitted to my unborn child.

Female's signature: _____

Subscribed and sworn before me this _____ day of _____, 20_____

My commission expires: _____
Notary Public/Deputy Clerk

Phone Number: _____

****** REMEMBER TO INCLUDE A COPY OF A VALID PICTURE I.D. FOR BOTH THE GROOM & BRIDE PLUS A MONEY ORDER OR CASHIER'S CHECK ******

(Go to www.mohavecourts.com for the list of court fees)

WILL NOT BE MAILED OUTSIDE THE UNITED STATES

PLEASE INITIAL BY SOCIAL SECURITY NUMBER.

Groom's social security number is: _____

Initial Here: _____

Bride's social security number is: _____

Initial Here: _____