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ADDRESS
SPECIFY

COUNTY _ CITY/TOWN_

ZIP

DOH-98 (12/2020)

STATE OF NEW YOR	K
DEPARTMENT OF HEALT	Н
AFFIDAVIT, LICENSE a	ınd
CERTIFICATE OF MARRI	AGE
DOOMEDOLIEE	

STATE FILE NUMBER (THIS SPACE FOR STATE USE ONLY	, —

	AFFIDAVIT, LICENS	SE an	nd						
ÜM	GISTER CERTIFICATÉ OF MA	RRIA	ا GE	SUPP	LEMENTAL F	ILE			
/	BRIDE/GROOM/SPOUSE			BF	RIDE/GROOM	I/SPOUSE			
	1. A. CURRENT FIRST NAME	1	1. A. CURRENT FIR	ST NAME					
	CURRENT MORE CHANG	'	CURRENT MIDD						
		——							
	CURRENT SURNAME		CURRENT S						
	B. BIRTH SURNAME, IF DIFFERENT		B. BIRTH SURNA DIFFERENT	ME, IF					
	* CHANGING MIDDLE AND/OR SURNAME UPON MARRIAGE IS OPTIONAL, SEE BACK FOR INFORMATI	TON.	* CHANGING MIDD	LE AND/OR SURNA	ME UPON MARRIAG	E IS OPTIONAL	, SEE BACK	FOR INFO	RMATION
	* C. MIDDLE NAME AFTER MARRIAGE (IF CHANGING)		"C. MIDDLE NAME MARRIAGE (IF						
	* D. SURNAME AFTER		D. SURNAME AF	TER					
	MARRIAGE (IF CHANGING)	 i	MARRIAGE (IF						
	E. SOCIAL SECURITY NUMBER	E	E. SOCIAL SECURIT	Y NUMBER					
	2. RESIDENCE A B	1	12. RESIDENCE A		В				
	(STATE) (COUNTY)			(STATE)		·	UNTY)		
	C. CHECK ONE CITY TOWN VILLAGE	ļ	C. CHECK ONE AND	CHY ROW	N VILLAGE				
	SPECIFY		SPECIFY						
	D. STREET ADDRESS ZIP		D. STREET ADDR	ESS			z	P	
	E. IS RESIDENCE WITHIN LIMITS OF CITY OR INCORPORATED VILLAGE? YES NO TO	1	E. IS RESIDENCE	WITHIN LIMITS OF	CITY OR INCORPOR	ATED VILLAGE	? YES	Пис	П
	3. A. AGE B. DATE OF BIRTH C. SEX (OPTIONAL)	_ ₁					C. SEX (OP	TIONAL \	
	3. A. AGE B. DATE OF BIRTH C. SEX (OPTIONAL) 4. EMPLOYMENT	`	13. A. AGE 14. EMPLOYMENT	5: 5:112 5: 5:	MM/DD	YYYY	o. oznijon		
	USUAL OCCUPATION		USUAL OCCUPAT	TION					
	5. PLACE OF BIRTH	1	15. PLACE OF BIRTH	I					
	(CITY, STATE or COUNTRY, IF NOT USA) 6. FATHER OR PARENT		16. FATHER OR PAR	(CITY, ST)	ATE or COUNTRY, IF	NOT USA)			
느	A NAME (ON CURRENT	Ι.	A. NAME (ON CURR	ENT					
ζ	BIRTH CERTIFICATE)	——	BIRTH CERTIFICAT	TE)					
FIDA	B. COUNTRY OF BIRTH		B. COUNTRY OF I	· · · · · · · · · · · · · · · · · · ·				·····	
Ι.	7. MOTHER OR PARENT A. NAME (ON CURRENT	1	 MOTHER OR PAP A. NAME (ON CURR 						
ΑF	# PIOTU CODICICATO		BIRTH CERTIFICAT						***************************************
	B. COUNTRY OF BIRTH		B. COUNTRY OF I	BIRTH					
	8. NUMBER OF 9. A. NUMBER OF PREVIOUS MARRIAGES ENDED BY	1	18. NUMBER OF		19. A. NUMBER	OF PREVIOUS I	MARRIAGES	ENDED BY	
	THIS MARRIAGE: DIVORCE: CIVIL ANNULMENT: DEATH:		THIS MARRIAGE:		DIVORCE:	CIVIL ANN	ULMENT:	DEA	TH:
	9. B. HOW DID LAST MARRIAGE END? DIVORCE (3) ANNULMENT (3) DEATH (2)		- 19. B HOW DID LAS	T MADDIAGE ENDS				-ATU[]	
		'			DIVORGE [13)	ANNULMENT	(3) DE	:AIH	2)
	C. DATE LAST MARRIAGE ENDED?		C. DATE LAST MA	RRIAGE ENDED?	МИООО	VVV	_		
	D. ARE ANY FORMER SPOUSE(S) ALIVE? YES NO		D. ARE ANY FORMER SPOUSE(S) ALIVE? YES NO						
			Lund Lund						
	10. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE THE FOLLOWING INFORMATION		20. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE THE FOLLOWING INFORMATION						
	DATE OF DECREE PLACE ISSUED AGAINST WH (MONTH, DAY, YEAR) (CITY/COUNTY, STATE or COUNTRY, IF NOT USA) SELF SPO		DATE OF DECREE PLACE ISSUED AGAINST WHOM (MONTH, DAY, YEAR) (CTY/COUNTY, STATE or COUNTRY, IF NOT USA) SELF SPOUSE						
	1ST I	¬ ₁	IST					\Box	П
	2ND		***************************************					_ 🗀	
	l	=						- 📙	
	3RD							[]	
	4TH	4	4TH					_ 🔲	
	I duly swear/affirm, depose and say, that to the best of my knowledge	and hali	ief that the inf	formation I pro	wided is true	and that I	declare	that no	legal
	impediment exists as to my right to enter into the marriage state.	and ben	iei diai ilie ilii	Offiadoff i pre	ovided is title	and maci	deciale	tilat ilo	icgai
	impountant oxide de to my night to enter into the manage etete.								
	21. SIGNATURE ► USE CURRENT NAME	2	22. SIGNATURE ▶		USE				
					USE	URRENT NAM	E		
	23. SUBSCRIBED AND SWORN TO/AFFIRMED BEFORE ME SIGNATURE OF TOWN OR CITY CLERK▶					DATE	:		
\rangle	This license authorizes the marriage in New York State of t	he partie	e named abov	o by any nare	on authorized			***************************************	
_	Domestic Relations Law §11 to perform marriage ceremonies with	hin New \	York State. Th	HIS LICENSE	VALID IN NE	W YORK	STATE	ONLY.	
Щ		y for the p	purpose of a s	econd or subs	sequent ceren	iony.			
LICENSE	24. TOWN OR CITY CLERK				ION PERIOD BEGIN		25. B SOL END	EMNIZATIONS AT MIDN	N PERIOD IGHT ON
Μ̈́	NAME (PRINT)			TIME	MONTH DAY	YEAR	MONTH	DAY	YEAR
쏙	SEAL > SIGNATURE >	DATE		111114	INDITITI DAT	1.000			
_	MAILING ADDRESS:			AM					
	STREET CITY/TO///N	STATE	ZP	PM					
	I CERTIFY THAT I SOLEMNIZED THE 26. SOLEMNIZATION OCCURRED 27. TYPE C	OF CEREMON			28. PLACE WHE	RE MARRIAG	E OCCURR	ED	
	MARRIAGE OF THE PARTIES NAMED TIME MONTH DAY YEAR 0 RE	LIGIOUS	1 CIVIL		A. STATE NEW YORK				
	ABOVE ON THE DATE AND AT THE AM 9 OT	PM 9 OTHER, SPECIFY			B. COUNTY		•		
	TIME AND FLACE INDICATED. FIVE								
ш					C. LOCATION OF CEREMONY (CHECK ONE AND SPECIFY)				
	29. OFFICIANT	LE			(CHECK ONE	AND SPECIF	(Y)		
A	29. OFFICIANT TITL								
A	29. OFFICIANT TITL				CITY CITY	AND SPECIF	Y) VILLAC	SE 🗌	
A	29. OFFICIANT TITL				CITY	TOWN	VILLAC	_	
ERTIFICATE	29. OFFICIANT TITL NAME (PRINT) SIGNATURE ► DAT MAILING ADDRESS: STREET CITY/TOWN	TE	STATE	ZIP		TOWN		_	
RTIFICAT	29. OFFICIANT TITL NAME (PRINT) SIGNATURE ► DAT MAILING ADDRESS: STREET CITY/TOWN	TE		ZIP	CITY	TOWN	VILLAC	_	
ERTIFICAT	29. OFFICIANT TITL NAME (PRINT) SIGNATURE > DAT MAILING ADDRESS: STREET CITY/TOWN 30. WITNESS TO CEREMONY	ΤΕ	STATE 31. WITNESS TO	ZIP CEREMONY	CITY OF (SPECIFY	TOWN	VILLA(_	
ERTIFICAT	29. OFFICIANT TITL NAME (PRINT) SIGNATURE ► DAT MAILING ADDRESS: STREET CITY/TOWN	ΤΕ	STATE	ZIP CEREMONY	CITY OF (SPECIFY	TOWN	VILLA(_	