## **Marriage License Questionnaire**

A New York State Marriage License is Valid for **60** days.

Name	me:							Surname after Marriage:					
Address:								Phone	e:				
Do yo	u liv	e in a:	CI	ГΥ	TOWN VII	LLAGI	£	Speci	fy:				
Coun	ty:												
Age:					Sex (optional):	M	F	SS#:					
Date of Birth:					Place	e of Birth:							
Usual Occupation:				Туре	e of Indust	ry or I	Busii	ness:					
Father's Name:							Born in US (if no list Country):						
Mother's Name (Maiden):							Born in US (if no list Country):						
Previo	ous N	Aarria	ges:	YES	NO							•	

## **Marriage License Questionnaire**

A New York State Marriage License is Valid for **60** days.

Name:							Surname after Marriage:								
Address	s:									Phone:					
Do you live in a: CITY TOWN VII					LAGE	,	Specify:								
County	:														
Age:				Sex (optional):	F	SS#:									
Date of Birth:				Place	of Birth:										
Usual Occupation:					Type	Type of Industry or Business:									
Father's Name:						Born in US (if no list Cou				list Counti	ry):				
Mother's Name (Maiden):							Born in US (if no list Country			ry):					
Previou	ıs Marr	iages:	YES	NO		_									