

AFFIDAVIT - Information to Complete a Marriage Record - Code of Virginia § 20-16

I, _____, the Affiant, state as follows:

1. That I hereby make application for a license to marry _____.
(name)
2. That I am unable to appear before the Clerk of the Powhatan County Circuit Court to personally provide the information required of me to complete the marriage record.
3. That the following information is offered to complete my portion of the Marriage Register of the Clerk:

Present Full Name: _____ SSN/DMV Control #: _____
(first) (middle) (last)

Maiden Surname (if Different): _____ Gender: _____

Age: _____ Date of Birth: _____ Place of Birth: _____
(years) (month/day/year) (state or foreign country)

No. of this Marriage: _____ Marital Status _____
(first, second, etc.) (if previously married: Widowed/Divorced)

Education: _____ College: _____
(highest grade completed – grades 0-12) (1,2,3,4 or 5+)

Usual Residence: _____
(Street address or route number)

City or Town of Residence: _____ Zip Code: _____

County: _____ State or Foreign Country: _____
(if independent city leave blank)

Parent's full name: _____ Parent's full maiden name: _____

I do solemnly swear that the above information required to complete the marriage record is true. I further make oath that neither I, nor the person whom I am to marry, are legally incompetent, currently married, nor, are related to each other to a prohibited degree. Chapter 3, Title 20, Code of Virginia. I further understand that willfully and knowingly making any false statement or supplying false information is a Class 4 felony. Chapter 7, Title 32.1, Code of Virginia

SIGNATURE OF PERSON MAKING THE AFFIDAVIT

COMMONWEALTH OF _____ City/County of _____, to-wit:

The foregoing AFFIDAVIT was subscribed and sworn to before me by _____

on the _____ day of _____, 20____.

My Commission Expires: _____ . Notary Registration Number: _____.

SEAL

NOTARY PUBLIC

PRINT NAME