WORK SHEET FOR PREPARATION OF MARRIAGE LICENSE FORM

LICENSE NUMBER			C	OUNTY								
1. MALE APPLICANT-NAI	. MALE APPLICANT-NAME FIRST				MIDDL	E		LAST				
2a. RESIDENCE-STATE 2b. COUNTY			Y	2c. CITY, TOWN, OR LOCAT				FION 2d. INSIDE CITY LIMITS (Specify Yes Or No)				
2e. STREET AND NUMBER				3. BIRTHPLACE (COUNTY			UNTY & STATE)	4a. DATE OF BIRTH (Month, Day, Year) 4b. AGE				
5a. FATHER-NAME			5b. \$	5b. STATE OF BIRTH 5			5c. ADDRESS (If Living)					
6a. MOTHER–MAIDEN NAME				6b. STATE OF BIRTH 6c. ADDF				S (if Living)				
7. RACE (Optional)	8. NUMBER OF THIS M	. NUMBER OF THIS MARRIAGE			IF PREVIOUSLY MARR			10. EDUCATION-SPECIFY HIGHEST GRA				
	FIRST, SECOND, ET		LAST MARRIAGE ENDED BY:			9b. DATE	ELEMENTARY HIGH SCHOOL		COLLEGE			
				Death, Divorce, Or Annulment (Specify)			MONTH YEAR	(0, 1, 2, 3, 4, or 8)	(1, 2, 3, or 4)	1, 2, 3, 4, or 5)		
11a. FEMALE APPLICANT-NAME FIRST							LAST	11b. MAIDEN SURNAME (If Different)				
12a. RESIDENCE-STATE 12b. COUNTY				12c. CITY, TOWN, OR LOCA				(Specify Yes Or No)				
12e. STREET AND NUMBER				13. BIRTHPLACE (COUNTY & STATE) 14a. DATE OF BIRTH (N					RTH (Month, Day, Yea	ar) 14b. AGE		
15a. FATHER-NAME				15b. STATE OF BIRTH			15c. ADDRESS (If Living)					
16a. MOTHER-MAIDEN NAME				16b. STATE OF BIRTH			16c. ADDRESS (if Living)					
17. RACE (Optional) 18. NUMBER OF THIS MARRIAGE					IF PREVIOUSL	Y MARRI						
FIRST, SECOND, ETC. (Specify) 19a.				ARRIAGE E	ENDED BY:		19b. DATE	ELEMENTARY HIGH SCHOOL		COLLEGE		
				Death, Divorce, Or Annulment (Specify)			MONTH YEAR	(0, 1, 2, 3, 4, or 8)	(1, 2, 3, or 4)	1, 2, 3, 4, or 5)		

DHHS 1607 (Revised 5/05) Vital Records

N.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES

WORK SHEET FOR PREPARATION OF MARRIAGE LICENSE FORM

LICENSE NUMBER				COUNTY								
1. MALE APPLICANT-NA		MIDDLE				LAST						
2a. RESIDENCE-STATE 2b. COUNTY			ΓY	2c. CITY, TOWN, OR LOCATIO				ON	2d. INSIDE CITY LIMITS (Specify Yes Or No)			
2e. STREET AND NUMBER				3. BIRTHPLACE (COUNTY & STATE)				4a. DATE OF BIRT	Year)	4b. AGE		
5a. FATHER-NAME				5b. STATE OF BIRTH 5c. ADDRESS (Living)				
6a. MOTHER-MAIDEN NAME				6b. STATE OF BIRTH 6c. ADDRESS (if L				Living)				
7. RACE (Optional) 8. NUMBER OF THIS MARRIAGE					IF PREVIOUSL	Y MARR	IED	10. EDUCATION-S	PECIFY HIGHE	IGHEST GRADE COMPLETED		
	FIRST, SECOND, ETC. (Specify) 9a.			a. LAST MARRIAGE ENDED BY:			9b. DATE	ELEMENTARY	HIGH SCHO	SCHOOL COLLEGE		
				Death, Divorce, Or Annulment (Specify			MONTH YEAR	(0, 1, 2, 3, 4, or 8)	(1, 2, 3, or 4)		, 2, 3, 4, or 5)	
11a. FEMALE APPLICAN	l				LAST	11b. MAIDEN SURNAME (If Different)						
12a. RESIDENCE–STATE 12b. COUNTY										2d. INSIDE CITY LIMITS (Specify Yes Or No)		
12e. STREET AND NUMB			13. BIRTHPLACE (COUNTY & STATE) 14a. DATE OF BIRTH (Month, Day					/, Year)	14b. AGE			
15a. FATHER-NAME				15c. ADDRESS (If Living)								
16a. MOTHER-MAIDEN NAME				16b. STATE OF BIRTH			16c. ADDRESS (if Living)					
17. RACE (Optional) 18. NUMBER OF THIS MARRIAGE					IF PREVIOUSL	Y MARR			ION-SPECIFY HIGHEST GRADE COMPLETED			
	FIRST, SECOND, E	FIRST, SECOND, ETC. (Specify) 19a.					19b. DATE	ELEMENTARY	HIGH SCHO		COLLEGE	
				eath, Divorce, Or	r Annulment (Sp	ecify)	MONTH YEAR	(0, 1, 2, 3, 4, or 8)	(1, 2, 3, or 4	4) 1	, 2, 3, 4, or 5)	