

TYPE / PRINT IN
PERMANENT
BLACK INK.
FOR
INSTRUCTIONS
SEE HANDBOOK.

VIRGIN ISLANDS OF THE UNITED STATES LICENSE AND CERTIFICATE OF MARRIAGE

DEPARTMENT OF HEALTH AND HUMAN SERVICES — PUBLIC HEALTH SERVICE — NATIONAL CENTER FOR HEALTH STATISTICS — 1989 REVISION

LICENSE NUMBER		STATE FILE NUMBER		
GROOM	1. GROOM'S NAME <i>(First, Middle, Last)</i>			2. AGE LAST BIRTHDAY
	3a. RESIDENCE — CITY, TOWN, OR LOCATION		3b. COUNTY OR ISLAND	
	3c. STATE	4a. BIRTHPLACE <i>(State or Foreign Country)</i>	4b. DATE OF BIRTH <i>(Month, Day, Year)</i>	5. SOCIAL SECURITY NO.
	6a. FATHER'S NAME <i>(First, Middle, Last)</i>	6b. BIRTHPLACE <i>(State or Foreign Country)</i>	7a. MOTHER'S NAME <i>(First, Middle, Maiden)</i>	7b. BIRTHPLACE <i>(State or Foreign Country)</i>
BRIDE	8a. BRIDE'S NAME <i>(First, Middle, Last)</i>		8b. MAIDEN SURNAME <i>(If different)</i>	
	10a. RESIDENCE — CITY, TOWN, OR LOCATION		10b. COUNTY OR ISLAND	
	10c. STATE	11a. BIRTHPLACE <i>(State or Foreign Country)</i>	11b. DATE OF BIRTH <i>(Month, Day, Year)</i>	12. SOCIAL SECURITY NO.
	13a. FATHER'S NAME <i>(First, Middle, Last)</i>	13b. BIRTHPLACE <i>(State or Foreign Country)</i>	14a. MOTHER'S NAME <i>(First, Middle, Maiden)</i>	14b. BIRTHPLACE <i>(State or Foreign Country)</i>
SIGNATURE	WE HERBY CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF AND THAT WE ARE FREE TO MARRY UNDER THE LAWS OF THIS STATE.			
	15. GROOM'S SIGNATURE		16. BRIDE'S SIGNATURE	
LICENSE TO MARRY	This License Authorizes the Marriage in This State of the Parties Named Above By Any Person Duly Authorized to Perform a Marriage Ceremony Under the Laws of the State of		17. EXPIRATION DATE <i>(Month, Day, Year)</i>	
	18. SUBSCRIBED TO AND SWORN TO BEFORE ME ON: <i>(Month, Day, Year)</i>	19. SIGNATURE OF ISSUING OFFICIAL		20. TITLE OF ISSUING OFFICIAL
	21. I CERTIFY THAT THE ABOVE NAMED PERSONS	22a. WHERE MARRIED — CITY, TOWN, OR LOCATION	22b. ISLAND	
CEREMONY	23a. SIGNATURE OF PERSON PERFORMING CEREMONY		23b. NAME <i>(Type/Print)</i>	23c. TITLE
	23d. ADDRESS OF PERSON PERFORMING CEREMONY <i>(Street and Number or Rural Route Number, City or Town, State, Zip Code)</i>			
LOCAL OFFICIAL	24a. SIGNATURE OF WITNESS TO CEREMONY		24b. SIGNATURE OF WITNESS TO CEREMONY	
	25. SIGNATURE OF COURT REGISTRATION OFFICIAL		26. DATE FILED BY COURT <i>(Month, Day, Year)</i>	

CONFIDENTIAL INFORMATION. THE INFORMATION BELOW WILL NOT APPEAR ON CERTIFIED COPIES OF THE RECORD.

	27. NUMBER OF THIS MARRIAGE — First, Second, etc. <i>(Specify below)</i>		28. IF PREVIOUSLY MARRIED, LAST MARRIAGE ENDED By Death, Divorce, Dissolution, or Annulment <i>(Specify below)</i>		29. RACE — American Indian, Black, White, etc. <i>(Specify below)</i>	30. EDUCATION <i>(Specify only highest grade completed)</i>	
				Date <i>(Month, Day, Year)</i>		Elementary/Secondary (0-12)	College (1-4 or 5+)
GROOM	27a.	28a.	28b.	29a.	30a.		
BRIDE	27b.	28c.	28d.	29b.	30b.		