

No - 2

DONNA A. SIMPSON, BRADLEY COUNTY CLERK

PO BOX 46
CLEVELAND, TN 37364
Phone Number: 423-728-7226

MARRIAGE
LICENSE

RECEIPT FOR MARRIAGE LICENSE

DATE _____

TOTAL RECEIVED _____

APPLICANTS

Certificate AFTER Obergefell v. Hodges

WJ wk23 Drawer:5 Site:1

DETACH ALONG THIS LINE

THIS BECOMES A LEGAL RECORD WHEN PROPERLY EXECUTED AND FILED.

COUNTY CLERK RESPONSIBLE FOR COMPLETION OF ITEMS 1-14 and ITEMS 17-21.

OFFICIANT RESPONSIBLE FOR ITEMS 15 & 16.


TYPE OR PRINT IN PERMANENT BLACK INK

ALL SIGNATURES MUST BE IN PERMANENT BLACK INK.

APPLICANTS MUST SIGN IN THE PRESENCE OF THE CLERK ISSUING THE LICENSE.

PERSON PERFORMING CEREMONY MUST RETURN CERTIFICATE TO CLERK ISSUING LICENSE WITHIN 3 DAYS AFTER CEREMONY.

ALL ITEMS 1-21 MUST BE COMPLETED.

LICENSE COUNTY: _____ NUMBER: _____			TENNESSEE DEPARTMENT OF HEALTH CERTIFICATE OF MARRIAGE		STATE FILE NO. _____
	1a. <input type="checkbox"/> GROOM <input type="checkbox"/> BRIDE <input type="checkbox"/> PARTNER-1 NAME (First, Middle, Last) Note the new choices-pick one		1b. ORIGINAL SURNAME (If different)	1c. SOCIAL SECURITY NUMBER	
2a. RESIDENCE - STATE		2b. COUNTY	2c. CITY, TOWN, OR LOCATION		
2d. STREET AND NUMBER		3. BIRTHPLACE (State or Foreign Country)	4. DATE OF BIRTH (Month, Day, Year)		
5a. FATHER / PARENT-1 NAME (First, Middle, Original Surname)		5b. BIRTHPLACE (State or Foreign Country)	6a. MOTHER / PARENT-2 NAME (First, Middle, Original Surname)	6b. BIRTHPLACE (State or Foreign Country)	
7a. <input type="checkbox"/> BRIDE <input type="checkbox"/> GROOM <input type="checkbox"/> PARTNER-2 NAME (First, Middle, Last) Note the new choices-pick one		7b. ORIGINAL SURNAME (If different)	7c. SOCIAL SECURITY NUMBER		
8a. RESIDENCE - STATE		8b. COUNTY	8c. CITY, TOWN, OR LOCATION		
8d. STREET AND NUMBER		9. BIRTHPLACE (State or Foreign Country)	10. DATE OF BIRTH (Month, Day, Year)		
11a. FATHER / PARENT-1 NAME (First, Middle, Original Surname) Note genderless choice		11b. BIRTHPLACE (State or Foreign Country)	12a. MOTHER / PARENT-2 NAME (First, Middle, Original Surname) Note genderless choice	12b. BIRTHPLACE (State or Foreign Country)	
13a. <input type="checkbox"/> GROOM <input type="checkbox"/> BRIDE <input type="checkbox"/> PARTNER-1 NAME (Signature)		13b. <input type="checkbox"/> BRIDE <input type="checkbox"/> GROOM <input type="checkbox"/> PARTNER-2 NAME (Signature)	13c. DATE SIGNED (Month, Day, Year)		
14. MAILING ADDRESS Street and Number _____ City _____ State _____ Zip _____					
15a. I CERTIFY THAT THE ABOVE NAMED PERSONS WERE MARRIED BY ME, IN THE STATE OF TENNESSEE, IN THE COUNTY OF _____ ON _____ (Month, Day, Year)				15b. CEREMONY - RELIGIOUS OR CIVIL (Specify)	
15c. OFFICIANT - Signature Note: Minister's signature "certifying" marriage				15d. DATE SIGNED (Month, Day, Year)	
15e. OFFICIANT - NAME (Print)			15f. ADDRESS OF OFFICIANT		
16a. WITNESS TO CEREMONY - Signature			16b. ADDRESS OF WITNESS		
17a. COUNTY CLERK - SIGNATURE <i>Donna A. Simpson</i>				17b. DATE FILED BY COUNTY CLERK (Month, Day, Year)	

CONFIDENTIAL INFORMATION

18. RACE Native American, Black, White, Etc. (Specify Below)	19. Number Of This Marriage First, Second, Etc. (Specify)	20. If Previously Married How Last Marriage Ended (Specify below)	Date Ended (Mo, Day, Year)	21. Education Specify Highest Grade Completed	
18a.	19a.	20a. 1 <input type="checkbox"/> Not previously married 2 <input type="checkbox"/> By death 3 <input type="checkbox"/> By divorce or annulment	20b.	21a. Elementary or Secondary (0-12)	College (1-4 or 5+)
18b.	19b.	20c. 1 <input type="checkbox"/> Not previously married 2 <input type="checkbox"/> By death 3 <input type="checkbox"/> By divorce or annulment	20d.	21b.	

APPLICANT - 1

APPLICANT - 2