VS-3 Rev. 7/23 Type or print clearly with permanent black ink. Complete every item.

## STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

Vital Records Section - Hartford, Connecticut 06134

STATE FILE NO		

LICENSE AND CERTIFICATE OF MARRIAGE: Town of WARREN

SPOUSE ONE SPOUSE TWO NAME (First) (Middle) (Last) NAME (First) (Middle) (Last) SEX DATE OF BIRTH (Mo., Dav. Year) AGE SEX DATE OF BIRTH (Mo., Dav. Year) AGE 24 22. BIRTHPLACE (State or Foreign Country) EDUCATION (No. Yrs. Completed) BIRTHPLACE (State or Foreign Country) EDUCATION (No. Yrs. Completed) GRADES 1-8 GRADES 9-12 GRADES 9-12 COLLEGE (1-5+) COLLEGE (1-5+) RESIDENCE (No. and Street) RESIDENCE (No. and Street) CITY OR TOWN CITY OR TOWN COUNTY STATE COUNTY STATE 32 SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR YES l I NO YES l l NO FATHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE) FATHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE) MOTHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE) MOTHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE) FATHER/PARENT BIRTHPLACE MOTHER/PARENT BIRTHPLACE FATHER/PARENT BIRTHPLACE MOTHER/PARENT BIRTHPLACE (State or Foreign Country) (State or Foreign Country) (State or Foreign Country) (State or Foreign Country) NO OF THIS NO. OF CIVIL 20a. IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST NO OF THIS NO. OF CIVIL 40a. IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST MARRIAGE UNIONS MARRIAGE UNIONS RELATIONSHIP WAS 1. MARRIAGE 2. CIVIL UNION RELATIONSHIP WAS 1. MARRIAGE 2. CIVIL UNION 39. 20b. LAST RELATIONSHIP ENDED BY: 1. DEATH 2. DISSOLUTION 3. ANNULMENT 40b. LAST RELATIONSHIP ENDED BY: 1. DEATH 2. DISSOLUTION 3. ANNULMENT 4. PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER 4. PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER We, the above named in this marriage license sincerely affirm and declare that the statements herein made are true. SIGNATURE OF SPOUSE ONE SIGNATURE OF REGISTRAR THIS DAY OF (Month, Day, Year) **LICENSE** SIGNATURE OF SPOUSE TWO SIGNATURE OF REGISTRAR THIS DAY OF (Month, Day, Year) This license certifies that the above-named persons have complied with the laws of Connecticut relating to a marriage license, and any person THIS LICENSE MUST BE Registrar of DATE (Month, Day, Year) authorized to celebrate a marriage may join the above-named in marriage in the town of: USED ON OR BEFORE Vital Records ISSUING OFFICIAL (Signature) TITI F DATE ISSUED (Month, Day, Year) I HEREBY CERTIFY THAT AND **OFFICIATOR** 53. THE ABOVE NAMED PARTIES WERE LEGALLY JOINED IN MARRIAGE BY IN THE COUNTY OF THIS DAY (Month, Day, Year) ME IN THE TOWN OF SIGNATURE OF PERSON PERFORMING CEREMONY PERSON PERFORMING CEREMONY (Please Print) OFFICIAL CAPACITY TYPE OF CEREMONY 60. 59. THIS CERTIFICATE RECEIVED FOR RECORD ON DATE: (Month, Day, Year) BY (Signature) REGISTRAR SOCIAL SECURITY NUMBER - SPOUSE ONE SOCIAL SECURITY NUMBER - SPOUSE TWO **ADMINISTRATIVE** 64.