

DECLARATION AND REGISTRATION OF INFORMAL MARRIAGE,

Falls

COUNTY, TEXAS

The form and content of this application is prescribed by section 2.004 of the Texas Family Code.

 $WARNING:\ IT\ IS\ A\ FELONY\ TO\ FALSIFY\ INFORMATION\ ON\ THIS\ DOCUMENT.\ THE\ PENALTY\ FOR\ KNOWINGLY\ MAKING\ A\ FALSE\ STATEMENT\ ON\ THIS\ FORM\ OR\ FOR\ SIGNING\ A\ FORM\ WHICH\ CONTAINS\ A\ FALSE\ STATEMENT\ IS\ 2\ TO\ 10\ YEARS\ IMPRISONMENT\ AND\ A\ FINE\ OF\ UP\ TO\ $10,000.\ (HEALTH\ AND\ SAFETY\ CODE,\ CHAPTER\ 195,\ SEC.\ 195.003)$

	First Name		Middle Name		Current La	st Name				
Applicant One	Woman's Maiden Name (If Applicable)				Telephone Number					
	woman's waiten waite (ii reppieable)		Telephone Number							
	Street Address			City		State	Zip			
7	Date of Birth	Place of Birth (inclu	ding city, county and state)	Social Security Nu	mber				
I am not related to the other applicant as: TRUE FALSE an ancestor or descendant, by blood or adoption; a brother or sister, of the whole or half blood or by adoption; a parent's brother or sister, of the whole or half blood or by adoption; a son or daughter of a brother or sister, of the whole or half blood or by adoption; a current or former stepchild or stepparent; or a son or daughter of a parent's brother or sister, of the whole or half blood or by adoption; I solemnly swear (or affirm) that we, the undersigned, are married to each other by virtue of the following facts: on or about we agreed to be married, and after that date we lived together as a married couple and in this state represented to others that we were married. Since the date of marriage to the other party I have not been married to any other person. This declaration is true and the information in it which I have given is correct.										
				A	pplicant's Signa	ture and Date Sig	ned			
	First Name		Middle Name		Current La	st Name				
Two	Woman's Maiden Name (If Applicable)				Telephone Number					
Applicant Two	Street Address			City		State	Zip			
Ψ	Date of Birth	Place of Birth (inclu	ding city, county and state)	Social Security Nu	mber				
I am not related to the other applicant as: TRUE FALSE an ancestor or descendant, by blood or adoption; a brother or sister, of the whole or half blood or by adoption; a parent's brother or sister, of the whole or half blood or by adoption; a son or daughter of a brother or sister, of the whole or half blood or by adoption; a current or former stepchild or stepparent; or a son or daughter of a parent's brother or sister, of the whole or half blood or by adoption; I solemnly swear (or affirm) that we, the undersigned, are married to each other by virtue of the following facts: on or about we agreed to be married, and after that date we lived together as a married couple and in this state represented to others that we were married. Since the date of marriage to the other party I have not been married to any other person. This declaration is true and the information in it which I have given is correct.										
	Applicant's Signature and Date Signed For County Clerk Office Use Only									
			Tor County Clerk	Connect Ost Only						
Subsc	cribed and sworn to before me on _		, 20	at	am/pm					
		County	Clerk Falls	County, Te	xas					
Ву_	Linda Watkins	Deputy	7							
Appli	cant One Identification Type (ID	& Age)		Licer	se Number					

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Applicant Two Identification Type (Id & Age)_