

CUSTER COUNTY MARRIAGE LICENSE WORKSHEET

⚠️ PHOTO ID & BIRTH CERTIFICATE or PASSPORT. PAYMENT (Check /Cash) IS REQUIRED ALONG WITH THIS APPLICATION BEFORE PROCESSING. PLEASE INCLUDE FULL "LEGAL" NAMES FOR BOTH PARTIES & PARENTS.

State of Nebraska – Department of Health and Human Services Finance and Support – VITAL RECORDS			
MARRIAGE WORKSHEET			
GROOM / PARTY A PHONE #:		BRIDE / PARTY B PHONE #:	
1. GROOM /PARTY A -NAME (First, Middle, Last, Suffix)			2. AGE
3a. COUNTRY	3b. STATE	3c. COUNTY	
3d. CITY, TOWN OR LOCATION	3e. RESIDENCE – Street and Number		3f. ZIP CODE
4. BIRTHPLACE (City and State or Foreign Country)		5. DATE OF BIRTH (Mo., Day, Yr.)	
6a. FATHER'S – Full Name (First, Middle, Last, Suffix)		6b. BIRTHPLACE (City and State or Foreign Country)	
7a. MOTHER'S – Full <u>Maiden</u> Name (First, Middle, Maiden)		7b. BIRTHPLACE (City and State or Foreign Country)	
8a. BRIDE /PARTY B -NAME (First, Middle, Last, Suffix)		8b. MAIDEN NAME (If different)	9. AGE
10a. COUNTRY	10b. STATE	10c. COUNTY	
10d. CITY, TOWN OR LOCATION	10e. RESIDENCE – Street and Number		10f. ZIP CODE
11. BIRTHPLACE (City and State or Foreign Country)		12. DATE OF BIRTH (Mo., Day, Yr.)	
13a. FATHER'S – Full Name (First, Middle, Last, Suffix)		13b. BIRTHPLACE (City and State or Foreign Country)	
14a. MOTHER'S – Full <u>Maiden</u> Name (First, Middle, Maiden)		14b. BIRTHPLACE (City and State or Foreign Country)	
CONFIDENTIAL INFORMATION: INFORMATION BELOW WILL NOT APPEAR ON CERTIFIED COPIES OF THIS RECORD			
15a. SOCIAL SECURITY NUMBER - Groom /Party A		15b. SOCIAL SECURITY NUMBER - Bride/Party B	
16. If previously married, last marriage ended either by –			
Groom/Party A: Death Dissolution Annulment		Date Marriage Ended (Mo., Day, Yr.) _____	
Bride/Party B: Death Dissolution Annulment		Date Marriage Ended (Mo., Day, Yr.) _____	
17a. Is Groom/Party A of Hispanic or Latino Origin? Yes No		17b. Is Bride/Party B of Hispanic or Latina Origin? Yes No	
RACE			
18a. Groom/Party A		18b. Bride/Party B	
Check one or more races to indicate what each person considers him/herself to be			
White			
Black or African American			
American Indian or Alaska Native			
Asian			
Native Hawaiian or Other Pacific Islander			

Marriage License fee \$25.00 Certified Copy \$9.00

CERTIFIED COPY IS REQUIRED IN ORDER FOR THE APPLICANT TO CHANGE THEIR LAST NAME, e.g. DRIVER'S LICENSE, SOCIAL SECURITY CARD,etc.

Certified Copy to be mailed to address below:

ADDRESS

CITY

ST

ZIP