



HALL COUNTY MARRIAGE LICENSE WORKSHEET

⚠ PHOTO ID, PROOF OF SOCIAL SECURITY NUMBER AND PAYMENT IS REQUIRED ALONG WITH THIS APPLICATION BEFORE PROCESSING. PLEASE INCLUDE FULL "LEGAL" NAMES FOR BRIDE, GROOM AND 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		15b. SOCIAL SECURITY NUMBER - Bride	
16. If previously married, last marriage ended either by –			
Groom: Death Dissolution Annulment		Date Marriage Ended (Mo., Day, Yr.) _____	
Bride : Death Dissolution Annulment		Date Marriage Ended (Mo., Day, Yr.) _____	
17a. Is Groom of Hispanic or Latino Origin? Yes No		17b. Is Bride of Hispanic or Latina Origin? Yes No	
RACE			
18a. Groom		18b. Bride	
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			



Hall County Marriage License Worksheet

Date of Application: _____

Drivers License: **Groom** _____ **Bride** _____
PartyA PartyB

Social Security Card: **Groom** _____ **Bride** _____
PartyA PartyB

\$25.00 cash paid: _____

Parental Consent for minor: Yes _____ No _____

Date of Marriage: _____

Person Performing Ceremony: _____

Place of Ceremony _____

Contact Numbers: **Groom** _____ **Bride** _____
PartyA PartyB

Alternate Phone Number: _____

WORK SHEET ONLY
NOT OFFICIAL