

**THE NAMES ON YOUR MARRIAGE LICENSE SHOULD MATCH WHAT IS ON YOUR BIRTH CERTIFICATE. PLEASE INCLUDE FULL "LEGAL" NAMES FOR BOTH APPLICANTS AND PARENTS**

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| State of Nebraska – Department of Health and Human Services Finance and Support – VITAL RECORDS                                                                                                                                                                                                                                                                                                          |                                           |                                                                                                             |        |
| <b>MARRIAGE WORKSHEET</b>                                                                                                                                                                                                                                                                                                                                                                                |                                           |                                                                                                             |        |
| GROOM/PARTY A PHONE #:                                                                                                                                                                                                                                                                                                                                                                                   |                                           | BRIDE/PARTY B PHONE #:                                                                                      |        |
| 1. GROOM/PARTY A – Full 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 – Full Name (First, Middle, Last)                                                                                                                                                                                                                                                                                                                                                      |                                           | 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)                                                         |        |
| <b>CONFIDENTIAL INFORMATION: INFORMATION BELOW WILL NOT APPEAR ON CERTIFIED COPIES OF THIS RECORD</b>                                                                                                                                                                                                                                                                                                    |                                           |                                                                                                             |        |
| 15a. SOCIAL SECURITY NUMBER – Groom/Party A                                                                                                                                                                                                                                                                                                                                                              |                                           | 15b. SOCIAL SECURITY NUMBER – Bride/Party B                                                                 |        |
| 16. If previously married, last marriage ended either by –<br>Applicant #1: <input type="checkbox"/> Death <input type="checkbox"/> Dissolution <input type="checkbox"/> Annulment      Date Marriage Ended (Mo., Day, Yr.) _____<br>Applicant #2: <input type="checkbox"/> Death <input type="checkbox"/> Dissolution <input type="checkbox"/> Annulment      Date Marriage Ended (Mo., Day, Yr.) _____ |                                           |                                                                                                             |        |
| 17a. Is Applicant #1 of Hispanic or Latino Origin? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                              |                                           | 17b. Is Applicant #2 of Hispanic or Latino Origin? <input type="checkbox"/> Yes <input type="checkbox"/> No |        |
| <b>RACE</b>                                                                                                                                                                                                                                                                                                                                                                                              |                                           |                                                                                                             |        |
| 18a. Groom/Party A                                                                                                                                                                                                                                                                                                                                                                                       |                                           | 18b. Bride/Party B                                                                                          |        |
| Check one or more races to indicate what each person considers him/herself to be                                                                                                                                                                                                                                                                                                                         |                                           |                                                                                                             |        |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                 | White                                     | <input type="checkbox"/>                                                                                    |        |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                 | Black or African American                 | <input type="checkbox"/>                                                                                    |        |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                 | American Indian or Alaska Native          | <input type="checkbox"/>                                                                                    |        |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                 | Asian                                     | <input type="checkbox"/>                                                                                    |        |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                 | Native Hawaiian or Other Pacific Islander | <input type="checkbox"/>                                                                                    |        |

**The fee for the marriage license is \$50.00 Cash. A certified copy of the marriage license may be requested after the ceremony for \$16.00 cash. The certified copy is required in order for the applicant to change their last name, e.g. Driver's License, Social Security, etc.**