

ENSURE ALL HIGHLIGHTED SECTIONS ARE COMPLETE

CLERK OF THE ARIZONA SUPERIOR COURT IN AND FOR THE COUNTY OF MARICOPA

IN THE MATTER OF THE APPLICATION OF:

Name 1 JOHN WALTER SMITH

And

Name 2 MARY KAREN WILLIAMS

FOR A LICENSE TO MARRY

AFFIDAVIT FOR
MARRIAGE LICENSE

Select: Bride Groom Spouse
STATE OF ARIZONA County of Maricopa

I, JOHN WALTER SMITH do swear and affirm that JOHN WALTER SMITH is my true name. That my age is 18 years; that I have provided my social security number to the Clerk of Superior Court and that it will be maintained confidentially according to provisions of A.R.S. 25-121C; that I reside at 123 ANY STREET, APT. 1002 PHOENIX AZ 85003

that we meet the requirements to marry as outlined in A.R.S. 25-101; that I understand that information on sexually transmitted diseases is available from the County Health Department on request and that these diseases may be transmitted to my unborn children.

Signature: John W. Smith

Affirmed by me this 16th day of July, 2020 (Month, Year)

Jeff Fine
Clerk of the Superior Court

Select: Bride Groom Spouse
STATE OF ARIZONA
County of Maricopa

I, MARY KAREN WILLIAMS, do swear or affirm that: MARY KAREN WILLIAMS is my true name; that my age is 18 years; that I have provided my social security number to the Clerk of Superior Court and that it will be maintained confidentially according to provisions of A.R.S. 25-121C; that I reside at 123 ANY OTHER STREET PHOENIX AZ 85003

that we meet the requirements to marry as outlined in A.R.S. 25-101; that I understand that information on sexually transmitted diseases is available from the County Health Department on request and that these diseases may be transmitted to my unborn children.

Signature: Mary Williams

Affirmed by me this 16th day of July, 2020 (Month, Year)

Jeff Fine
Clerk of the Superior Court

License # _____