THE STATE OF

COUNTY OF\_

## AFFIDAVIT OF ABSENT APPLICANT FOR MARRIAGE LICENSE The form and content of this affidavit is prescribed by section 2.007 of the Texas Family Code.

Name of Absent Applicant (First, Midd	Maiden Surname (If applicable)			
Address (Street, city, state, zip)				
Date of Birth	Place of Bi	Place of Birth (including city, county and state)		
Social Security Number		Citizenship		
have not been divorced within the last 30 of		I am not related to the other applicant as:  TRUE  FALSE		
I am not presently married. $\Box$ <b>TRUE</b> $\Box$		<ul> <li>an ancestor or descendant, by blood or adoption;</li> <li>a brother or sister, of the whole or half blood or by adoption;</li> </ul>		

- 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 desire to marry:

□ TRUE □ FALSE

Name of Other Applicant (First, Middle, Last, Suff	īx)	
Maiden Surname (If applicable)	Age	Approximate date on which the marriage is to occur
Address (Street, city, state, zip)		

The Reason I am unable to appear personally before the county clerk for the issuance of the license:

I am not presently delinquent in the payment of court ordered child support.

The other applicant is not presently married  $\Box$  **TRUE**  $\Box$  **FALSE** 

## THE FOLLOWING SECTION CAN ONLY BE COMPLETED BY MEMBERS OF THE ARMED FORCES OF THE UNITED STATES STATIONED IN ANOTHER COUNTRY IN SUPPORT OF COMBAT OR ANOTHER MILITARY OPERATION WHO ARE UNABLE TO ATTEND THE CEREMONY:

Name of adult person, other than the other applicant, to act as proxy for the purpose of participating in the ceremony:

## I SOLEMNLY SWEAR (OR AFFIRM) THAT THE INFORMATION I HAVE GIVEN IN THIS DECLARATION IS TRUE AND CORRECT. I AM AWARE THAT MAKING A FALSE STATEMENT ON THIS DOCUMENT IS PUNISHABLE TO UP TO 2 TO 10 YEARS IN PRISON AND UP TO A \$10,000 FINE [HSC §195.003]

Your Signature:

Date:

Signature of Notary			
Printed Name and Title:			
Subscribed and sworn before me on:	Expiration date of Commission:	(Seal)	