**Fee: $61.00 Non-Refundable**

## AFFIDAVIT FOR APPLICANT A:

STATE OF WASHINGTON
COUNTY OF SKAGIT

I, the undersigned, do solemnly swear or affirm that the information on this form is true: and that I am eighteen years of age or older or qualify as attached. I am not afflicted with any contagious sexually transmitted disease, or if present, the condition is known to the other applicant, and further, that I am not related to the other applicant. Marriage license is not valid for 3 days from the date of application and is void if marriage is not solemnized in the State of Washington within sixty (60) days of issuance of license.

**BIRTHDATE**_____ **AGE**_____ **BIRTH STATE**_____

____ SINGLE ____ DIVORCED ____ WIDOWED ____UNDER CONTROL OF GUARDIAN

**CURRENT ADDRESS** _____
STREET ADDRESS CITY STATE ZIP

**ADDRESS PAST SIX MONTHS** _____
STREET ADDRESS CITY STATE ZIP

**FULL NAME**_____
FIRST MIDDLE LAST

**SIGNATURE**_____

PLACE NOTARY SEAL HERE

DEPUTY AUDITOR/ NOTARY PUBLIC: _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS

_____ DAY OF _____, 20____

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## AFFIDAVIT FOR APPLICANT B:

STATE OF WASHINGTON
COUNTY OF SKAGIT

I, the undersigned, do solemnly swear or affirm that the information on this form is true: and that I am eighteen years of age or older or qualify as attached. I am not afflicted with any contagious sexually transmitted disease, or if present, the condition is known to the other applicant, and further, that I am not related to the other applicant. Marriage license is not valid for 3 days from the date of application and is void if marriage is not solemnized in the State of Washington within sixty (60) days of issuance of license.

**BIRTHDATE**_____ **AGE**_____ **BIRTH STATE**_____

____ SINGLE ____ DIVORCED ____ WIDOWED ____UNDER CONTROL OF GUARDIAN

**CURRENT ADDRESS** _____
STREET ADDRESS CITY STATE ZIP

**ADDRESS PAST SIX MONTHS** _____
STREET ADDRESS CITY STATE ZIP

**FULL NAME**_____
FIRST MIDDLE LAST

**SIGNATURE**_____

PLACE NOTARY SEAL HERE

DEPUTY AUDITOR/ NOTARY PUBLIC: _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS

_____ DAY OF _____, 20____

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**FOR OFFICIAL USE ONLY:**

**APPLICATION DATE:** _____ **VALID DATE:** _____ **LICENSE NUMBER:** _____