TOWN OF BATAVIA MARRIAGE WORKSHEET

Full Name		
First	Middle	Current Surname
Surname	_	
After Marriage		Birth Name
Residence		
State	County	Town
Street Address		
Mailing Town/City	-	Zip Code
Phone Ema	ail Address	
Age Sex-M/F (optional)	Birth date_	
Social Security #		
Employment: Usual Occupation Type of Business		
Birthplace		
City and State		
Father's Name		
Father's Birthplace		
City,	State	and/or Country
Mother's Birth Name		
City,	State	and/or Country
Number of this Marriage		
Previous Marriages: Number of pre	vious marriages, which Annulment	
How did the last one end? Div Date last marriage ended?	vorce Annulment_	Death
Are any former spouses alive	?	
If previously divorced, provide the f	ollowing information:	
	lace Issued	Against Whom? (self or spouse)
1		
2		
3		