



THE STATE OF TEXAS

COUNTY OF ARANSAS

**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, Middle, Last)		Maiden Surname (If applicable)
Address (Street, city, state, zip)		
Date of Birth	Place of Birth (including city, county and state)	
Social Security Number	Citizenship	

I have not been divorced within the last 30 days.  TRUE  FALSE

I am not presently married.  TRUE  FALSE

I am currently married to the other applicant.  TRUE  FALSE

I am presently delinquent in the payment of court ordered child support.

TRUE  FALSE

The other applicant is not presently married  TRUE  FALSE

I am not related to the other applicant as:  TRUE  FALSE

- an ancestor or descendant, by blood or adoption;
- a brother or sister, of the whole or half blood or by adoption;
- 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:

Name of Other Applicant (First, Middle, Last)		
Maiden Surname if Other Applicant is Female	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:

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

\* ORIGINAL PHOTO ID IS REQUIRED