SUPPLEMENTAL MARRIAGE LICENSE APPLICATION FOR PARTY NOT APPEARING

If one of the parties cannot appear in person at the Local Registrar's Office at the time of application for marriage, the applicant appearing will complete the full application supplying all of the information for both parties. This supplemental application must be completed by the non appearing marriage applicant. A copy of the marriage application made by the appearing party is on the reverse side of this form.

Tennessen warning for the collection of social security numbers: If you have a social security number you are required by federal and state law to put it on the marriage license application (title 42 US Code Sec 666(a) (13) (a) MN statutes section 144.223, and MN statutes, sec 517.08 subd 1a. Your social security number is reported to the MN Department of Health and will be kept private. If necessary, your social security number may be used to help obtain financial support of your child.

Notice: a party who has a felony conviction for a crime committed on or after August 1, 2000 under Minnesota law or the law of another state or federal jurisdiction may not use a different name after marriage except as authorized by Minnesota statute 259.13, and doing so is a gross misdemeanor.

PLEASE PRINT Full Legal Name		
Full Legal Name after Marriage		
I hereby swear or affirm that I have either committed no felony cricomplied with the notice requirements as set forth in Minnesota S does not comply with Minnesota Statute 259.13 and uses a difference gross misdemeanor.	Statutes. I understand that o	person who has a felony conviction who
☐ NOT applicable Signature		
☐ Applicable Date Prosecutor Served Attach Affidavit of Service	Signature	
Certification to accuracy of Marriage Application as shown on the	reverse side of this form	
☐ My social security number is		
☐ I certify that I do not have a social security num	nber	
I hereby certify that I am a listed applicant on this marriage applic have reviewed the information supplied by the party appearing an side of this certification.		
Signature		
State of Minnesota		
County ofss.		
This instrument was acknowledged before me this	day of	, 20
	Notary seal	
Notary Public Signature		