

WORK SHEET FOR PREPARATION OF MARRIAGE LICENSE FORM

LICENSE NUMBER _____		COUNTY _____				
APPLICANT 1	1a. NAME FIRST MIDDLE LAST					1b. LAST NAME PRIOR TO FIRST MARRIAGE (IF APPLIES)
	1c. GENDER (Optional)	2a. RESIDENCE-STATE	2b. COUNTY	2c. CITY, TOWN, OR LOCATION		2d. INSIDE CITY LIMITS (Specify Yes or No)
	2e. STREET AND NUMBER		3. BIRTHPLACE (COUNTY & STATE)		4a. DATE OF BIRTH (Month, Day, Year)	4b. AGE
	5a. PARENT'S NAME AT PARENT'S BIRTH		5b. STATE OF BIRTH	5c. ADDRESS (If Living)		
	6a. PARENT'S NAME AT PARENT'S BIRTH		6b. STATE OF BIRTH	6c. ADDRESS (If Living)		
	7. RACE (Optional)	8. NUMBER OF THIS MARRIAGE - FIRST, SECOND, ETC. (Specify)	IF PREVIOUSLY MARRIED		10. EDUCATION-SPECIFY HIGHEST GRADE COMPLETED	
			9a. LAST MARRIAGE ENDED BY: Death, Divorce, Or Annulment (Specify)	9b. DATE MONTH YEAR	ELEMENTARY (0,1,2,3,4, ... or 8)	HIGH SCHOOL (1, 2, 3, or 4) COLLEGE (1, 2, 3, 4, or 5)
APPLICANT 2	11a. NAME FIRST MIDDLE LAST					11b. LAST NAME PRIOR TO FIRST MARRIAGE (IF APPLIES)
	11c. GENDER (Optional)	12a. RESIDENCE-STATE	12b. COUNTY	12c. CITY, TOWN, OR LOCATION		12d. INSIDE CITY LIMITS (Specify Yes or No)
	12e. STREET AND NUMBER		13. BIRTHPLACE (COUNTY & STATE)		14a. DATE OF BIRTH (Month, Day, Year)	14b. AGE
	15a. PARENT'S NAME AT PARENT'S BIRTH		15b. STATE OF BIRTH	15c. ADDRESS (If Living)		
	16a. PARENT'S NAME AT PARENT'S BIRTH		16b. STATE OF BIRTH	16c. ADDRESS (If Living)		
	17. RACE (Optional)	18. NUMBER OF THIS MARRIAGE - FIRST, SECOND, ETC. (Specify)	IF PREVIOUSLY MARRIED		20. EDUCATION-SPECIFY HIGHEST GRADE COMPLETED	
			19a. LAST MARRIAGE ENDED BY: Death, Divorce, Or Annulment (Specify)	19b. DATE MONTH YEAR	ELEMENTARY (0,1,2,3,4, ... or 8)	HIGH SCHOOL (1, 2, 3, or 4) COLLEGE (1, 2, 3, 4, or 5)

DHHS 1607 (Revised 11/2016)
N.C. Vital Records

N.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES

<u>RACE (Optional)</u>	<u>ABBREVIATIONS</u>
White	Wh
Black	Blk
African-American	AfrAm
American Indian	AmInd
Alaska Native	AlaNat
Asian Indian	AsInd
Chinese	Chin
Filipino	Fili
Japanese	Japa
Korean	Kore
Vietnamese	Viet
Other Asian	OAsi

<u>RACE (Optional)</u>	<u>ABBREVIATIONS</u>
Native Hawaiian	NatHaw
Guamarian	Guam
Chamorro	Cham
Samoan	Samo
Other Pacific Islander	OPacIs
Mexican	Mexi
Mexican-American	MexAm
Chicano	Chica
Puerto Rican	PueRi
Cuban	Cuba
Other Spanish/Hispanic/Latino	OSpHLa
Other	Oth

OFFICE USE ONLY:
 DATE/PLACE MARRIAGE _____
 MINISTER NAME _____
 MINISTER # _____
 APPLICANTS PH# _____
 APPLICANT 1 _____
 DOB _____ SSC _____
 ID PRESENTED NCDL _____ OTHER _____
 DIVORCE PAPERS _____

APPLICANT 2 _____
 DOB _____ SSC _____
 ID PRESENTED NCDL _____ OTHER _____
 DIVORCE PAPERS _____