| STATE OF COLORADO APPLICATION FOR MARRIAGE LICENSE   | County of  | License #   |
|--|--|---|
| PARTY ONE:   |  |   |
| Legal Name:  | Suffix   | Previous Married Name   |
| Address:   |  |   |
| Number/Street  Birth Date:// Sex (circle one): Male Female   | City Last name at birth if different (opt):  | State/Zip   |
| Social Security Number: City&State   | of Birth:  |   |
| Parent/Legal Guardian:   | City&State:  |   |
| Parent/Legal Guardian:   | City&State:  |   |
|  |  | Married Civil Union   |
| If Divorced/Dissolved/Declared Invalid or Widowed Date:// City&State:  | Type of Court (if appl   | licable):   |
| If previously in a civil union, name of former partner:  |  |   |
| Proof of Age: (circle one) Valid Driver's License Passport Birt  | h Certificate Other (specify)  |   |
| PARTY TWO:   |  |   |
| Legal Name:  | Suffix   | Previous Married Name   |
| Address:<br>Number/street  |  |   |
| Number/street  Birth Date:/ Sex (circle one): Male Female  | City Last name at birth if different (ont):  | State/Zip   |
| Social Security Number: City&State   |  |   |
|  | City&State:  |   |
| Parent/Legal Guardian:   | Last City distate.   |   |
| Parent/Legal Guardian:   | City&State:  |   |
|  |  | Married Civil Union   |
| f Divorced/Dissolved/Declared Invalid or Widowed Date:/ City&State:  | Type of Court (if and  | icable).  |
| f previously in a civil union, name of former partner:   | Type of court (if appl   | icabic).  |
|  | h Certificate Other (specify)  |   |
| Are the applicants related by blood? Yor N How Married Status: (circle one) Common Law Renewing your vo  |  |   |
| DATH: We, the undersigned, hereby make application for a license to unite in marri-<br>best of our knowledge, that neither applicant is under legal guardianship, or have prov-<br>we should not be married. | iage, and under oath we state that the information ided written consent or judicial order, and believe | given is true and correct to the<br>that there exists no reason why |
| PARTY ONE Signature:   | PARTY TWO Signature:   |   |
| subscribed and sworn to me this day of, 20 at _  |  |   |
| Bv:  | (seal  | )   |
| County Clerk and Recorder By:  | lerk   |   |
| ype of Ceremony: (circle one) Religious Civil Self Date teturn Mail Address  | of Ceremony:   |   |

Form M-1, Approved by the Office of the State Registrar of Vital Statistics, Revised 06/2016