

(Use typewriter and/or black ink)

Vital Statistics
P.O. Box 83720
Boise, Idaho 83720-0036

STATE OF IDAHO

County of _____

Marriage License

County File No. _____

KNOW ALL PERSONS BY THIS CERTIFICATE: That any regularly ordained minister of the Gospel, authorized by the rites and usages of the church or denomination of Christians, Hebrews, or religious body of which said minister is a member, or any judge or magistrate, or competent officer to whom this may come, not knowing of any lawful impediments thereto, is hereby authorized and empowered to solemnize the rites of Matrimony between:

- | | |
|---|--|
| 1. Full name _____ | 12. Full name _____ |
| 2. Title (select one) _____ BRIDE _____ GROOM _____ PARTNER 3. Sex _____ | 13. Title (select one) _____ BRIDE _____ GROOM _____ PARTNER 14. Sex _____ |
| 4. Address _____
<i>City</i> _____ <i>County</i> _____ <i>State</i> _____ | 15. Address _____
<i>City</i> _____ <i>County</i> _____ <i>State</i> _____ |
| 5. Age _____ 6. Race _____ 7. Single _____ 8. Widowed _____ 9. Divorced _____ | 16. Age _____ 17. Race _____ 18. Single _____ 19. Widowed _____ 20. Divorced _____ |
| 10. Maiden Name if previously married _____ | 21. Maiden Name if previously married _____ |
| 11. Birthplace: City _____ State _____ | 22. Birthplace: City _____ State _____ |

And to certify the same to said parties, or either of them under the signature and seal, of said minister or official capacity, and thereupon is required to deliver the original to the parties so married.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal, at _____, _____ County, Idaho, this _____ day of _____, A.D. _____

Recorder

Deputy

Marriage Certificate

I, _____, a _____ residing in the city of _____, in the county of _____, in the state of Idaho, do certify that, in accordance with the authority on me conferred by the above license, I did on this _____ day of _____, in the year A.D. _____ in the city of _____ in the county of _____, in the state of Idaho, solemnize the rites of matrimony between _____ of _____ in the county of _____, of the state of _____ and _____ of _____, in the county of _____ of the state of _____, in the presence of _____ and _____.

WITNESS my hand at the county aforesaid, this _____ day of _____, A.D. _____.
In the presence of _____
_____ and _____
Officiant's Signature _____
Officiant's Mailing Address _____

IDMARR (This copy for the parties of this Marriage) (Revised 10/14)

IDMARR (Revised 10/14) Official should send this copy back to the County Recorder immediately. (Use typewriter and/or black ink)

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Boise, Idaho 83720-0036

STATE OF IDAHO

State File No. _____

County of _____

Marriage License

County File No. _____

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- | | |
|---|--|
| 1. Full name _____ | 12. Full name _____ |
| 2. Title (select one) _____ BRIDE _____ GROOM _____ PARTNER 3. Sex _____ | 13. Title (select one) _____ BRIDE _____ GROOM _____ PARTNER 14. Sex _____ |
| 4. Address _____
<i>City County State</i> | 15. Address _____
<i>City County State</i> |
| 5. Age _____ 6. Race _____ 7. Single _____ 8. Widowed _____ 9. Divorced _____ | 16. Age _____ 17. Race _____ 18. Single _____ 19. Widowed _____ 20. Divorced _____ |
| 10. Maiden Name if previously married _____ | 21. Maiden Name if previously married _____ |
| 11. Birthplace: City _____ State _____ | 22. Birthplace: City _____ State _____ |

And to certify the same to said parties, or either of them under the signature and seal, of said minister or official capacity, and thereupon is required to deliver the original to the parties so married.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal, at _____, _____ County, Idaho, this _____ day of _____, A.D. _____

Recorder

Deputy

Marriage Certificate

I, _____, a _____ residing in the city of _____, in the county of _____, in the state of Idaho, do certify that, in accordance with the authority on me conferred by the above license, I did on this _____ day of _____, in the year A.D. _____ in the city of _____ in the county of _____, in the state of Idaho, solemnize the rites of matrimony between _____ of _____ in the county of _____, of the state of _____ and _____ of _____, in the county of _____ of the state of _____, in the presence of _____ and _____.

WITNESS my hand at the county aforesaid, this _____ day of _____, A.D. _____.

In the presence of _____

and _____

Officiant's Signature _____
Officiant's Mailing Address _____

Date Received _____
by County Recorder _____; Signature _____ County Recorder; Book _____, Page _____; Date Received _____ by State Registrar _____