

## DECLARATION AND REGISTRATION OF INFORMAL MARRIAGE,

\_COUNTY, TEXAS

The form and content of this application is prescribed by section 2.004 of the Texas Family Code.

 $WARNING:\ IT\ IS\ A\ FELONY\ TO\ FALSIFY\ INFORMATION\ ON\ THIS\ DOCUMENT.\ THE\ PENALTY\ FOR\ KNOWINGLY\ MAKING\ A\ FALSE\ STATEMENT\ ON\ THIS\ FORM\ OR\ FOR\ SIGNING\ A\ FORM\ WHICH\ CONTAINS\ A\ FALSE\ STATEMENT\ IS\ 2\ TO\ 10\ YEARS\ IMPRISONMENT\ AND\ A\ FINE\ OF\ UP\ TO\ $10,000.\ (HEALTH\ AND\ SAFETY\ CODE,\ CHAPTER\ 195,\ SEC.\ 195.003)$ 

	First Name	Middle Name		Current Last Name			Suffix				
Applicant One	Wamania Maidan Nama (IF An-Parkia)			The Name Name Name							
	Woman's Maiden Name (If Applicable)  Telephone Number										
	Street Address			City		State	Zip				
	Date of Birth	Place of Birth (including city, c	ounty and state)		Social Security Nur	nber	<u> </u>				
I am r	not related to the other applicant as:										
	<ul> <li>an ancestor or descendant, by blood or adoption;</li> <li>a brother or sister, of the whole or half blood or by adoption;</li> <li>a parent's brother or sister, of the whole or half blood or by adoption;</li> <li>a son or daughter of a brother or sister, of the whole or half blood or by adoption;</li> <li>a current or former stepchild or stepparent; or</li> <li>a son or daughter of a parent's brother or sister, of the whole or half blood or by adoption;</li> </ul>										
I sol	I solemnly swear (or affirm) that we, the undersigned, are married to each other by virtue of the following facts: on or about we agreed to be married, and after that date we lived together as a married couple and in this state										
	esented to others that we w	ere married. Since the	date of marriag	e to the othe	er party I have			•			
pers	on. This declaration is true	and the information i	n it which I have	e given is co	rrect.						
	Applicant's Signature and I				ure and Date Sign	ed					
	First Name	Middle Name		Current	Current Last Name		Suffix				
Iwo	Woman's Maiden Name (If Applicable)				Telephone Number						
Applicant Two	Street Address		City			State	Zip				
	Site Address			·							
	Date of Birth	Place of Birth (including city, c	ounty and state)		Social Security Nur	nber					
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 solemnly swear (or affirm) that we, the undersigned, are married to each other by virtue of the following facts: on or about we agreed to be married, and after that date we lived together as a married couple and in this state represented to others that we were married. Since the date of marriage to the other party I have not been married to any other person. This declaration is true and the information in it which I have given is correct.											
				A	pplicant's Signat	ure and Date Sign	ed				
		For C	County Clerk Office	e Use Only							
Subse	cribed and sworn to before me or	1	, 20 at _		am/pm						
		County Clerk _		County, Te	xas						
By_		Deputy									
Appl	icant One Identification Type (II	0 & Age)		Licen	se Number						
Appl	icant Two Identification Type (II	O & Age)		Volu	me	Page					