

Maryland Circuit Court Clerk's Office Use Only

Marriage License Number _____

Local Number _____

COMPLETE FORM ONLINE AND PRINT OUT (OR PRINT LEGIBLY) - SEE INSTRUCTIONS

**STATE OF MARYLAND
MARRIAGE LICENSE APPLICATION**

(For Use During COVID-19 Emergency Only)

Maryland county in which marriage ceremony is to take place:

Date of ceremony, if known: May 9, 2021

☒ Montgomery County or ☐ Baltimore City

I/We apply for a marriage license under Maryland law, and state under oath:

Party 1: First Name Karen Middle Name _____ Last Name Shapiro Sr./Jr./etc. _____

Age 22 State/Country of Birth Israel Social Security No. 217 - 53 - 1213

Residential Address: 7819 Heatherton Ln Potomac MD 20854
Street Number and Street Name City State and Zip Code

Current Marital Status:

- ☒ Single
☐ Widowed – Date(s) and State/Country of Spouse's Death(s): _____
☐ Divorced – Date(s) and State/Country of Divorce Decree(s): _____

Method of Consent:

- ☒ Party 1 is 18 years of age or older
☐ Party 1 is under 18 years of age and _____ consents to this marriage. This consenting person is my (check one) ☐ Parent or ☐ Legal Guardian.

Party 2: First Name Alex Middle Name Joseph Last Name Ghelman Sr./Jr./etc. _____

Age 22 State/Country of Birth Venezuela Social Security No. 628 - 96 - 5179

Residential Address: 4422 Sarong Dr Houston TX 77096
Street Number and Street Name City State and Zip Code

Current Marital Status:

- ☒ Single
☐ Widowed – Date(s) and State/Country of Spouse's Death(s): _____
☐ Divorced – Date(s) and State/Country of Divorce Decree(s): _____

Method of Consent:

- ☒ Party 2 is 18 years of age or older
☐ Party 2 is under 18 years of age and _____ consents to this marriage. This consenting person is my (check one) ☐ Parent or ☐ Legal Guardian.

Is Party 2 related to Party 1 by either blood or marriage? ☐ Yes ☒ No. If yes, what is the relationship? _____
(e.g., second cousins, aunt/nephew)

I/WE SOLEMNLY AFFIRM UNDER THE PENALTIES OF PERJURY AND UPON PERSONAL KNOWLEDGE THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT.

(This may be signed by one or both parties.)

Signature of Party 1

Signature of Party 2

Phone and email: 2404818979 karenshap@gmail.com Phone and email: 2816108871 alexghelman@gmail.com

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SWORN AND SUBSCRIBED (check one) ☐ in person ☐ by videoconference ☐ by affidavit

Date/Time: _____ Printed Name: _____ Signature: _____

Print