License # _____

AFFIDAVIT REGARDING SOCIAL SECURITY NUMBER

STATE OF COLORADO
County of Chaffee

Pursuant to CRS 14-14-113 Under oath I Swear or Affirm That I Do Not Have a Social Security Number.

This sworn statement is to accompany my application for a Colorado marriage license.

Applicant Name: _____
First Middle Last

Date of Birth: _____
Month Day Year

Signature: _____

STATE OF COLORADO)
) ss.
COUNTY OF CHAFFEE)

Subscribed and sworn to before me in the County of Chaffee in the State of Colorado, this _____ day of _____, 20___.

Witness my hand and official seal.

My commission expires: _____

_____
Notary Public