



TARA S. GREEN, CLAY COUNTY CLERK OF COURT AND COMPTROLLER

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**REQUIRED PREMARITAL STATEMENT
Florida Statute § 741.04**

We, the undersigned hereby state:

Trans# _____

Printed Name of Spouse 1

Printed Name of Spouse 2

(Check the appropriate statements)

1. I, Spouse 1, have completed a premarital preparation course.
 I, Spouse 2, have completed a premarital preparation course.
 We, Spouse 1 and Spouse 2 together, have completed a premarital preparation course.
 We, Spouse 1 and Spouse 2 together, have not completed a premarital preparation course.
2. We have both obtained and read or otherwise accessed the information contained in the handbook or other electronic media presentation of the rights and responsibilities of parties to a marriage specified in s. 741.0306, Florida Statutes.
3. We, Spouse 1 and Spouse 2 together, are are not the parents of a minor child(ren) born in the State of Florida.
4. Spouse 1 Social Security Number _____ Spouse 1 Current Age _____
5. Spouse 2 Social Security Number _____ Spouse 2 Current Age _____

All of the following information is required for questions regarding your marriage license and for mailing a certified copy of the marriage license:

Name: _____ Mailing Address: _____ City, State, and Zip Code: _____ Phone Number: _____
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Signature of Spouse 1

Signature of Spouse 2

Subscribed and sworn before me on _____.

Deputy Clerk