## County of Douglas, State of Nevada Application for a single ceremony certificate of authority to solemnize a marriage IN THE STATE OF NEVADA

1.	Full Name of Applicant			N	ickname or Alias	s used		
2.	Residence Address			State Zip				
3.								
4.	Mailing Address		City	State		Zip		
5.	Date of Birth	Place of Birt	th		Social Se	curity Number		
0.	Telephone # (Residence or cell)	Email		Notary P	ablic Certificate	Number (if app	licable)	
6.	Date of ordination if ministe	er or appointment da	te if notary publ	ic:				
็บอน	are a notary public in the	State of Nevada an	pluina for a ce	ertificate, s	kip items 7. 8	3. and 9.)		
		of the church	or religious	organization	n you are	currently	affiliated	
	Name	Address	Cit	y State	Zip	Phone #		
8.	Are you presently in goo	od standing with ye	our church or	religious o	rganization?	Yes	Nc	
9.	If presently retired, list name(s) and address(es) of religious organization(s) for which you had active charge within your state in the last three years.							
	Address		City	S	tate	Zip		
10	. Have you ever been convict If yes, specify: a. Date of	ed of a felony? Conviction:	YesNo b. Pla	ace of Convi	etion:			
11	. Have you ever had a previous If yes, where?							
10	. Please mark the appropriat	e response (failure to	mark one of the	three will re	esult in denial	of application	)	
14	. I lease mark the appropriat	e response (landre to	mark one of the	tilice will re	sun in demai	от аррпсацог.	.).	
	I am not subject to a court order for the support of a child.							
	I am subject to a court order for the support of one or more children and I am in compliance with the order, or I am in compliance with a plan approved by the District Attorney or other public agency enforcing the order, for the repayment of the amount owed pursuant to the order; or							
	I am subject to a court order for the support of one or more children and I am NOT in compliance with the order or a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.							
13	. Wedding ceremony informa	tion pertaining to thi	s one-time certifi	icate applica	tion:			
Date	of ceremony:		Location:					
Partic	cipant One's full name:		Participant	two's full na	ame:			
Partic	cipant One's address:		Participant	two's address	s:			
	y acknowledge that I am subje				ith respect to t	he provisions (	of NRS 122	
ΓΑΤΕ	ATE OF		XSignature of Applicant					
OUNT	ΓΥ OF	•	Signature of Applicant					
e fore	nt in the above Application for egoing application and knows the stated on information and belief	ne contents thereof, tha	to Solemnize Ma at the same are tr	<i>rriages in the</i> ue of his/her	State of Nevadown knowledge	da, that he/sh	e has read	
e fore	nt in the above <i>Application for</i> egoing application and knows th	Certificate of Authority ne contents thereof, the	to Solemnize Ma at the same are tr s, he/she believes	rriages in the ue of his/her them to be tru	State of Nevac own knowledge ae.	da, that he/sh	e has read	
e fore erein	nt in the above <i>Application for</i> egoing application and knows th	Certificate of Authority ne contents thereof, that and as to those matters	to Solemnize Ma at the same are tr s, he/she believes	rriages in the ue of his/her them to be tru	State of Nevadown knowledge	da, that he/sh	e has read	
e fore erein	nt in the above Application for egoing application and knows th stated on information and belief	Certificate of Authority ne contents thereof, that and as to those matters EFORE ME	to Solemnize Ma at the same are tr s, he/she believes	rriages in the ue of his/her them to be tru	State of Nevadown knowledgene.  Signature of A  NOTE: IT IS	da, that he/sh	e has read	
e fore erein <b>UBSC</b> his	nt in the above Application for egoing application and knows the stated on information and belief CRIBED AND SWORN TO BE	Certificate of Authority ne contents thereof, that and as to those matters EFORE ME	to Solemnize Ma at the same are tr s, he/she believes	rriages in the ue of his/her them to be tru	State of Nevadown knowledge at a second own knowledge at a second of the	da, that he/she, except for su  Applicant  UNLAWFUI  MARRIAGES  UANCE OF A	e has read the matters  TO PRIOR	

Mail to: Douglas County Clerk, Attn: Marriage Officiant, PO BOX 218, Minden, NV 89423 Include: Filing Fee of \$30.00 payable to County Clerk, Notarized Application and Affidavit of Authority to Solemnize Marriages.

## AFFIDAVIT OF AUTHORITY TO SOLEMNIZE MARRIAGES

State of	
County of) ss.	
The	is organized and carries on
its work in the State of (state).	
(street address, city, state)	The
hereby fineligious organization)	inds that
is in goo authorized to solemnize marriages)	d standing and is authorized by the
I am duly authorized by	
Signature of Official	Printed name of Official
Title of Official	Address of Official
City, State, Zip of Official	Telephone number of Official
Signed and sworn to (or affirmed) beforeof the year	ore me thisday of the month of
	111 0
Notary Pu	iblic for (county and state)