

Alabama Marriage Certificate

| ADPH-HS-50/Rev. 8/2019 | | | | State File Number 101 | | | | | | |
|---|---|-------------------------|---------------------------|-----------------------|--|---|---------------|---|---|--|
| SPOUSE 1 INFORMATION | 1. NAME: First HEATHER R | | ddle ELVIN | Last . | | 2. LAST NAME PRIOF | R TO FIRST MA | RRIAGE | 3. DATE OF BIRTH (Month, Day, Year) 04/20/1992 | |
| GROOM | 4. SEX (Male or Female) Female | 5. RACE (Specify) BLACK | American Indian, Black, V | - | | SIDENCE COUNTY LEBY | | | 7. RESIDENCE STATE ALABAMA | |
| ☑ BRIDE □ SPOUSE | 8. NO. OF PREVIOUS MARRIAGES 9. IF PREVIOUSLY MARRIED, REAS Divorce, Dissolution, Annulment) | | | | ON LAST MARRIAGE ENDED – (Specify Death, | | | 10. STATE OR FOREIGN COUNTRY OF BIRTH ALABAMA | | |
| - | 11. FATHER/PARENT NAME (First, Middle, Last Name Prior to First Marriage CLIFFORD MCWANE MELVIN | | | | 12. MOTHER/PARENT NAME (First, Middle, Last Name Prior to First Marriage) WANDA SUE CHAMBERS | | | | | |
| SPOUSE 2 INFORMATION | 13. NAME: First Middle Last CHRISTOPHER JAMAL DANIEL | | | | | 14. LAST NAME PRIOR TO FIRST MARRIAGE DANIEL | | | 15. DATE OF BIRTH (Month, Day, Year) 12/04/1994 | |
| BRIDE | 16. SEX (Male or Female) Male | 17. RACE (Specify BLACK | American Indian, Black, \ | • | | SIDENCE COUNTY ELBY | - | | 19. RESIDENCE STATE ALABAMA | |
| ☑ GROOM □ SPOUSE | 20. NO. OF PREVIOUS MARRIAGES 21. IF PREVIOUSLY MARRIED, READIVORCE, Dissolution, Annulment) | | | | | ` ' ' | | | 22, STATE OR FOREIGN COUNTRY OF BIRTH ALABAMA | |
| | 23. FATHER/PARENT NAME (First, Middle, Last Name Prior to First Marriage UNKNOWN | | | | | 24. MOTHER/PARENT NAME (First, Middle, Last Name Prior to First Marriage) KIMBERLY LASHAWN DANIEL | | | | |
| AFFIDAVITS OF SPOUSES | | | | | | | | | | |
| 25. SPOUSE 1 SIGNATURE: DATE: DATE: DATE: 110112019 DATE: 11-01-0 | | | | | | | | | DATE: 1/-01-209 | |
| 27. NOTARY SEAL: | , | - | | 28, | . NOTA | RY SEAL: | | | | |
| My Comm. Expires July 7, 2021 OUBLIC AND | | | | | My Comm. Expires July 7, 2021 PUBLIC AT AT AT ATTENTION OF THE PROPERTY OF TH | | | | | |
| My Commission expires: $7-7-21$ | | | | | My Commission expires: $7-7-2/$ | | | | | |
| 29. NOTARY SIGNATURE: Carol Smith DATE: 11-1-19 30. NOTARY SIGNATURE: 11-1-19 Carol Smith | | | | | | | | | | |
| FOR MARRIAGE TO BE VALID, THIS FORM MUST BE DELIVERED TO PROBATE COURT FOR RECORDING WITHIN 30 DAYS OF THE LATTER OF THE DATES OF THE SPOUSES' SIGNATURES. If either or both parties to the marriage are <u>under the age of 18, but at least 16 years of age, and have not been previously married</u> , the consent of a parent or guardian is required. The consenting parent(s)/guardian(s) must complete and attach the Affidavit of Consent to this marriage certificate. Both pages must be presented together to the probate court in order for the marriage to be valid. | | | | | | | | | | |
| TO BE COMPLETED BY PROBATE COURT 31. DATE RECEIVED BY PROBATE COURT 32. BOOK/PAGE/INSTRUMENT NUMBER 33. COUNTY OF RECORDING PROBATE COURT 34. COUNTY OF RECORDING PROBATE COURT 35. COUNTY OF RECORDING PROBATE COURT | | | | | | | | | | |

DO NOT STAMP BELOW LINE