

## Greg James Clerk of Circuit and County Courts Wakulla County 3056 Crawfordville Highway Crawfordville, Florida 32327

850-926-0322

## REQUIRED PREMARITAL STATEMENT

F.S. §741.01 and §741.04

We, the undersigned hereby state:	Transaction#
Printed name of Spouse I	Printed Name of Spouse 2
1	•
We have attested that we	
have completed a premarital prep	aration course.
	herwise accessed the information contained in the handbook or other rights and responsibilities of the parties to a marriage specified in
areare not the parents of	a common minor child(ren) born in the state of Florida.
Spouse I - Social Security Number	Spouse I Current Age
Spouse 2 - Social Security Number ——	Spouse 2 Current Age
All of the following information is required for copy of the marriage license:	for questions regarding your marriage license and for mailing a certified
Mailing Address:	
City, State, and Zip Code:_	
Email:	
,	•
Signature of Spouse I	Signature of Spouse 2
Subscribed and sworn before me on	
	Deputy Clerk