

AFFIDAVIT OF ELIGIBILITY FOR MARRIAGE

I certify that on this day the individual named below appeared before me,

<i>current last name</i>	<i>current first name</i>	<i>current middle name</i>

*Who, being duly sworn, deposes and says that:*

My full name at birth was

<i>birth last name</i>	<i>birth first name</i>	<i>birth middle name</i>

I was born on

<i>day of birth</i>	<i>month of birth</i>	<i>year of birth</i>	<i>city of birth</i>	<i>country of birth</i>

I reside at

<i>street</i>	<i>city</i>	<i>country</i>

I have never been married.

*Print your name above now, and wait to sign your name until asked to do so by the consular officer.*

Subscribed to and sworn before me on this date \_\_\_\_\_ at \_\_\_\_\_.

*Signature and printed name and title of U.S. consular officer*

*U.S. Embassy, Jakarta, Indonesia*

This affidavit must be notarized by a U.S. consular officer accredited to the Indonesian Department of Foreign Affairs. The U.S. consular officer notarizing this affidavit is not empowered to regulate issues of overseas marriage or rights of spouses and inheritance, and does not verify the information in this sworn statement.

AFFIDAVIT OF ELIGIBILITY FOR MARRIAGE

I certify that on this day the individual named below appeared before me,

<i>current last name</i>	<i>current first name</i>	<i>current middle name</i>

*Who, being duly sworn, deposes and says that:*

My full name at birth was

<i>birth last name</i>	<i>birth first name</i>	<i>birth middle name</i>

I was born on

<i>day of birth</i>	<i>month of birth</i>	<i>year of birth</i>	<i>city of birth</i>	<i>country of birth</i>

I reside at

<i>street</i>	<i>city</i>	<i>country</i>

All my prior marriages have been legally terminated and I have no impediments to marriage.

*Print your name above now, and wait to sign your name until asked to do so by the consular officer.*

Subscribed to and sworn before me on this date \_\_\_\_\_ at \_\_\_\_\_.

*Signature and printed name and title of U.S. consular officer*

*U.S. Embassy, Jakarta, Indonesia*

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