Rachel M. Sadoff

CLERK OF THE CIRCUIT COURT & COMPTROLLER
EIGHTEENTH JUDICIAL CIRCUIT
BREVARD COUNTY, FLORIDA

OFFICIAL RECORDS 700 SOUTH PARK AVENUE BUILDING B (32780) POST OFFICE BOX 2767 TITUSVILLE, FLORIDA 32781-2767

COUNTY OF BREVARD



DEPARTMENT (321) 637-2006 FAX (321) 264-5246 WWW.BREVARDCLERK.US

CERTIFICATE OF CONSENT FOR MARRIAGE

STATE OF FLORIDA

BE IT KNOWN, that We (I) the Parents (Parent)	of (name of minor) who is
years of age, do hereby give our (my) consent to (his)(her) marriage to	
NOTE: Both parents must sign consent unless the custody of minor by a court order, or if one parent	
PLEASE INDICATE BELOW.	
DIVORCED, GRANTED FULL CUSTODYYE	ES NO
DECEASEDYES NO	
Signature of Parent(s) or Guardian(s)	
STATE OF FLORIDA COUNTY OF BREVARD	
The foregoing instrument was acknowledged bef	ore me this by as identification and who did did not
take an oath.	ao idontinoation and who aid aid not
	<u>-</u>
Commission No	Deputy Clerk/Notary Public
	(Name of Notary typed, printed or stamped)