## NOTICE OF CHANGE OF ADDRESS AND COUNTY OF RESIDENCE

## **FOR**

## RETIRED MINISTER OR OTHER PERSON AUTHORIZED TO SOLEMIZE MARRIAGES

Full Name of Minister or O  NEW ADDRESS & CONTACT INFORM		Solemnize Marriages	- (First, Middle, Last, Suffix)		
2					
2Residence Physical Address	City	State	Zip Code		
Mailing Address, if different	City	State	Zip Code		
4.	5.		6.		
Residence Phone #	5Alternate Phone	#	6E-Mail Address		
7. Current Church or Religious Organization	Affiliation:				
Name of Church or Religious Organizati	on				
Affiliation / Denomination		Church or R	Church or Religious Organization Phone Number		
Physical Address	City	State	Zip Code		
Mailing Address, if Different	City	State	Zip Code		
8. Prior Physical Address		State	Zip Code		
)					
Prior Mailing Address, if different	City	State	Zip Code		
0. Authorized to Solemnize Marriages by _		Name of County	Count	y, Nevada	
1. License/Certificate/Authorization Numbe	r:	Date Retired St	atus Granted:		
			Month & Year (	(Approx)	
The undersigned hereby notices idence) of his residency in said County (old county of residence) fouthorization to solemnize marriages	county and requests orward copies of an	that the County ( y and all pertinen	Clerk of t files or information conce	erning n	
DATED this day of		, 20_			