## APPLICATION FOR AMENDMENT OF MARRIAGE CERTIFICATE

See instructions and list of suggested evidence on reverse side. State of For Office Use Only: Certificate #\_\_\_\_ County of \_\_\_\_ 1. Please list information as it currently appears on the marriage certificate you want to amend: Name of bride: Name of groom: County which issued license:\_\_\_\_\_\_ Date of marriage:\_\_\_\_\_ 2. List items to be corrected: Item No. As Now Listed on Record **Correct Information** 3. I hereby swear that the information listed above is true and correct to the best of my knowledge. Signature (husband, wife, parent, guardian, or person responsible for filing certificate) Relationship City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_ County of \_\_\_\_\_ The foregoing instrument was acknowledged by me this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 200 \_\_ by \_\_\_\_\_ Notary Public \_\_\_\_\_ Residing at \_\_\_\_\_ 4. Fees Required. Number of certified copies of amended record \_\_\_\_\_ x \$7.00 each . . . . . . . . . . . . = \_\_\_\_\_ Total Enclosed ..... = \_\_\_\_ Please enclose stamped, self-addressed, business size envelope. FOR VITAL RECORDS USE ONLY. Evidence Accepted: Code \_\_\_\_\_ 1. \_\_\_\_\_\_ Date Amended \_\_\_\_\_ By Whom Amended \_\_\_\_\_

Rev. 9/2005 Amend MC

## INSTRUCTIONS

This application **MUST** be signed in the presence of a notary public.

Corrections made during the first year require one item of documentary evidence. Corrections made more than one year after marriage requires two or more items of documentary evidence.

The documentary evidence must have been established five years prior to application or within seven years of the date of marriage. Only original documents or certified copies of the originals are acceptable. Affidavits of Personal Recollection are **not** acceptable.

THE EVIDENCE SUBMITTEDF MUST LIST THE INFORMATION EXACTLY AS IT IS TO BE SHOWN ON THE MARRIAGE CERTIFICATE AND RELATE TO INFORMATION SHOWN ON THE RECORD.

DATE AND PLACE OF MARRIAGE MAY BE CORRECTED ONLY UPON WRITTEN AUTHORIZATION OF THE PERSON PERFORMING THE CEREMONY.

<u>Suggested Document</u> Where to Obtain which may be submitted

Baptismal Record Church where baptized

Federal Census Record Bureau of the Census

P. O. Box 1545

Jeffersonville, IN 47131

Insurance Policy Application Insurance company

School Census Record County Superintendent of Schools

In county where attended

Birth Certificate Vital Statistics Office of state where born

Application for original Social Local Social Security Office

Security Number

Voter Registration Election Commissioner or County Clerk

Military Service Record Appropriate branch of service

## The documentary evidence, application, and fees should be mailed to:

**Vital Records** 

1033 O Street, Suite 130 P. O. Box 95065 Lincoln, NE 68509-5065

For assistance or more information, feel free to call our office at 402-471-0918.