

Public Health Vital Records
APPLICATION FOR AMENDMENT OF MARRIAGE CERTIFICATE

See instructions and list of suggested evidence on reverse side.

Please enclose a photocopy of applicant's photo identification when submitting this form.

State of _____
County _____

FOR OFFICE USE ONLY: Certificate # _____

1. Please list information as it currently appears on the marriage certificate you want to amend:

Name of bride/party b: _____

Name of groom/party a: _____

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: _____
(spouse, guardian, or person responsible for filing certificate)

Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

State: _____

County of: _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20__ by _____

(Notary Public)

4. Fees required

To correct the record: \$16.00

Number of certified copies of amended record _____ x \$16.00 each = _____

Total enclosed:

Please enclose stamped, self-addressed, business size envelope.

FOR VITAL RECORDS USE ONLY:

Evidence accepted:

Code: _____

1. _____ 3. _____

2. _____ 4. _____

Date amended: _____

By whom amended: _____

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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 require 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 SUBMITTED 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.

Suggested document which may be submitted:	Where to obtain:
Baptismal Record	Church where baptized
Federal Census Record	Bureau of 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 Security Number	Local Social Security Office
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.