



Recorder's Office

Sharon J. Budin, Recorder

Angie LaVoi, Chief Deputy Recorder

APPLICATION TO AMEND A MARRIAGE RECORD

NOTE: name's after marriage cannot be amended using this form.

The County's Marriage record appears to be incorrect or incomplete and I request the document be amended as follows: List both applicants on record, then **ONLY** identify portion to be amended. Also provide acceptable evidence for the requested amendment.

Minnesota State Statutes 144.227, 144.211 to 144.2131 or 144.216

Applicant #1:

Name on record*	
Amended Name	
Amended date of birth	
Other	

Applicant #2:

Name on record*	
Amended Name	
Amended date of birth	
Other	

Marriage Information

Amended Marriage Date	
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Requester Information:

Name*	
Mailing Address*	
City, State, Zip code*	
Daytime Phone*	
Email Address	
Relationship*	

Recorders Office Use Only:

Requester's signature and signature of notary public

I certify that the information provided on this application is accurate and complete to the best of my knowledge.

Requester's signature	Notary Stamp/Seal	
Signed or attested before me on: __ day of _____, 20 _____		
Printed name of notary public		
Notary public signature	My commission expires	

<i>Original Marriage Date:</i>	<i>Book:</i>	<i>Page:</i>
<i>I have Printed Updated Marriage Certificate.</i>	<i>Initials:</i>	<i>Today's Date:</i>

Jody Deutsch, Deputy

Loni Davies, Deputy

Ashley Thelemann, Deputy