

Affidavit for Correction

Mail to: **Center for Health Statistics**

P.O. Box 47814

This is a legal document. Complete in ink and do not alter.							360-236-4300	
	g		ST	ATE OFFI	CE USE ONLY			
State File Number Fe			e Number		Initials	Date	Affidavit Number	
		Re	quired information	n must m	atch current in	nformation on record	<u>'</u>	
Required				larriage Dissolution (Divorce)				
	Name on Record: First	Middle	Last			2. Date of Event: MM/DD/YYYY	3. Place of Event: (City or County)	
	4. Father/Parent Full Birth Name (Spouse A for Marriage or Dissolution)				5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution)			
	First	Middle	lle Last/Maider		First	Middle	Last/Maiden	
	6. Name of Person Requesting Correction: Relationship t			o Self cord: Parent(s	☐ Guardian S) ☐ Funeral Director	☐ Informant ☐ Hospital ☐ Other (specify)		
	eturn Mailing Address:				0.1	01.1		
	Box or Street Address phone Number:				Email Address:	State	Zip	
()							
	Use the section	on below for requ	uesting any chan	ges on th	e record. The re	ecord is incorrect or	r incomplete as follows:	
The record currently shows:						The true	fact is:	
8.					9.			
10.					11.			
12.					13.			
	I declare und	er penalty of per	iury under the la	ws of the	State of Washir	ngton that the forgo	ing is true and correct.	
14a.	Signature:	or portainy or por	jary arraor trio ia			2 nd parent (if required):	mg io trao ana con con	
Printed name: Date:					Printed name: Date:			
		.1 1 20	INSTRUCTIONS -					
	•					· · ·	f documentation include:	
					School transcripts		en/Permanent Resident card (I-551)	
` `						ive birth certificate as		
1. (2. T	th Certificates Only a parent(s), legal gu Fhe proof(s) must matc Ann Doe. Proof documentation mus	h the asserted fact(s). For example, if th	e affidavit s	ays the name sho		certificate. ne proof must show the name to be Mar	
4.	This affidavit cannot be udunder 18 If legal guardian(s), include to age one or up to of Parentage form, last on certificate (can be a thereafter, a court order	sed to add a parent ude certified court of one year following the name can be chang any combination of	to a birth certificate rder proving guardial the filing of an Acknow ed once to either par the first, middle or la	(use Ackno nship. vledgement ents' name	wledgment of Pare Adult (18 years o Only the adult If the first or n required. If the first, mic	or older) t can change their own b middle name is missing,	oirth certificate. three pieces of proof documentation ar misspelled, or month and/or day of birt	

- No proof is required to change the first or middle name.*
- To correct parent's information, one proof documentation is required.
- To correct the sex of the child, one proof documentation from a medical provider is required.
 - To change any part of the name of a child using this form, **signatures from both parents listed on the certificate are required**. If one parent is deceased, submit a death
- To correct parent's birth date, place of birth, or name, one proof documentation

certificate with request. **Death Certificates**

- Only the informant may change the non-medical information without proof documentation. The funeral director, executors/administrators, or a family member may change the non-medical information with proof documentation. Family members are spouse or registered domestic partner, parent, sibling, or adult child or stepchild. Marital status requires a certified court order if someone other than the informant is requesting the change.
- The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

Marriage/Dissolution (Divorce) Certificates

- 1. Personal facts (minor spelling changes in name, date or place of birth, or residence) may be changed by the person with one piece of proof documentation.
- 2. To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit.