

Utah Department of Health and Human Services Office of Vital Records and Statistics

Affidavit to amend a record — application for license to marry

Application number							State file number	
County of is	suance							
County clerk	1a. Spou	se 1 first na	me	1b. Spouse	1b. Spouse 1 middle name		1c. Spouse 1 last name	
information as reported originally registered on marriage application.	2a. Spous	se 2 first na	me	2b. Spouse	2b. Spouse 2 middle name		2c. Spouse 2 last name	
	3a. Date of marriage			3b. Place of	3b. Place of marriage (city)		3c. Place of marriage (county)	
			!	No corrections				
Statement of amendments	4. Item number	5a. Facts e	exactly as stated				s they should have been stated on the original recore of occurrence	
		<u> </u>						
	; 	<u> </u>						
	6a.							
Why is change necessary?	6b.							
	ou.							
Oath of	I hereby certify under penalty of perjury, that I have personal knowledge of the above facts and that the information given above is true and correct. 7. Signature of first witness					Subscribed and sworn to before me this dayof, 20 Notary public		
Spouse 1 or first witness	8. Date signed		9. Age of witness	9. Age of witness 10. Relationship record is beir		erson whose		
	11. Address of witness (street, city, state, ZIP code)					_		
Oath of	I hereby certify under penalty of perjury, that I have personal knowledge of the above facts and that the information given above is true and correct. 12. Signature of second witness						Subscribed and sworn to before me this dayof, 20 Notary public	
Spouse 2 or second witness	13. Date signed			14. Age of witness 15. Relationship of witr record is being ame		erson whose	S E	
	16. Address of witness (street, city, state, ZIP code)					A L		
County clerk use only	17. [17. Date accepted 18. Local official making return to Utah Department of Health and					uman Services	
State office use only	19. [Date accepted	20. Office of	f the state registrar				