Information Sheet for the Affidavit to Correct a Birth Certificate



Checklist to Amend a Birth Record - In addition to submitting the Birth Affidavit form, you must:

- Submit Birth Order Form
- Provide Copy of Current Photo ID
- Pay \$35 Amendment Fee
- Pay Required Certificate Fee (if ordering a new birth certificate)
 - \$25 for one computer issued certificate (all information for births in 2008 through present, basic information for births in 1903 through 2007)
 - \$30 for one full image (photocopy) certificate (available only for 1903-2007 birth records)
 - You may exchange one incorrect original birth certificate, issued within the last 12 months, for a free corrected certificate. (Original certificates must be submitted to exchange.)
 - All other certificates issued within 12 months may be exchanged for \$5 each.
- Submit Original Evidence Document (if required)

Guidelines for Original Evidence Documents

- Original of the document must be submitted. Faxed, scanned, emailed, or photocopied documents cannot be accepted.
- Document information must match what is now listed on the birth certificate except for item being corrected.
- Original evidence documents will be returned to you when corrections are completed.
- Each item to be amended must be supported by one original evidence document. We cannot use multiple sources to
 meet evidence requirements. For example, an amended name must be shown in its entirety (first middle last) on one
 document.

Evidence must show:

- CORRECT full name (first, middle, last) as it is to be corrected to on the birth record, including full middle name.
- CORRECT date of birth or age if birth date is being corrected, the birth date as it should appear on the birth record.
- Additional information to be corrected on the birth record.

For Child Under Age 1: Evidence is usually not required to amend* a child's name until after their first birthday. Correctly completed amendment requests must be postmarked before the child's first birthday to be accepted without evidence. After the child's first birthday, the requirements change, by law, and may require an evidence document or a court order or judgment. *(This may include an entirely new name for the child.)

To Correct Child's Information:

- For child 7 years old or older, document must be at least 5 years old to correct child information.
- For child 6 years old or younger, evidence must be at least 1 year old to correct child information.
- To correct child's date of birth, time of birth, or medically determined sex at birth, a hospital affidavit is required until the medical record is no longer available (our office will obtain this for you), then evidence must be dated prior to 7th birthday.

To Correct Parent Information:

- Document must be dated before the child's birth to correct parent information.
- To correct child's last name shared with parent or the spelling of a parent name, parent date of birth, or parent place of birth, evidence document must be dated before the child's birth date and include parent full name, date of birth, or age.

See Examples for possible evidence documents on next page.

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Examples for evidence documents include:

- · Original hospital memento birth record
- Medical record for child with letter from attendant/doctor
- Original immunization record
- · Original baptismal record or religious blessing record
- Original certified school attendance record or school enrollment record
- Original certified child's record listing registrant as a parent
- Original military discharge record
- Original passport, issued more than five years ago
- Certified court documents—divorce, custody, parenting, etc.
- · Certified copy of application for Social Security Number

Oregon Record as Evidence:

If the evidence document is a marriage, parent's birth, older sibling's birth, your own, or your child's birth record filed in Oregon Vital Records, fill in the applicable sections on page 2 of the affidavit form. We will locate the record in our files and determine whether it is acceptable.

For additional information and examples for evidents documents for specific types of corrections, visit the "Change a Record" menu at the Vital records website at www.HealthOregon.org/chs.

Helpful Hints for completing the Birth Affidavit Form:

- You may fill out the form on your computer (if accessing it on our website) and print it or print the blank form and fill it out by hand.
- If you complete the form by hand, print clearly in blue or black ink.
- If ANY words are crossed out or any white out is used on the form, the affidavit will be rejected. If you make a
 mistake, fill out a new form again completely.
- Do not sign the form until you are with the notary.
 - Make one payment for all fees. No cash. Make payment by money order or check to OHA/Vital Records.
 - Do not staple payment or documents to each other or to the order form.

Place all materials in one sealed envelope and submit to Oregon Vital Records by:

Mail: Oregon Vital Records

Amendments Unit PO Box 14050 Portland OR 97293 **Drop Box:** Oregon Vital Records

Amendments Unit 800 NE Oregon Street Portland OR 97232

The bright blue box is located at the entrance by the west door (located in the parking lot).

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Affidavit to Correct a Birth Certificate

For Office Use Only					
File#					
Z#					

AUTHORIT	Ÿ				Z# <u> </u>	
Child's name listed on record (at birth)	(first)		(middle)			(last)
Child's date of birth			County of birth			Oregon
Type information or clearl required in the presence of an additional notarized form	a Notary. When fini		•	•		•
Description of item to be corrected (First name of child, mother/parent A's birth place, father/parent B's birth date, etc.)		Original record <i>now</i> shows		hows	Corrected item should show	
 Sign your name C Registrant (child) Each parent on re 	listed on the recor	d) must sig	n if age 18 or ol			
Please provide your email in	=	_	inge(s) to the ci	iliu 5 ililoilila	tion ii ciiiu is	under age or 10.
I, (we), do hereby declare above. It is a Class C felo for an amendment of a bir	ny for any person		-			
^ı —	ant (child listed on re n (not listed on reco	•	•	roof of guardia	nship.) [☐ Mother or Parent A☐ Father or Parent B
Printed name:	,					
Signature:						
Street address:						
City/State/Zip:			 Š			
Subscribed to before me on	thisday	of	20			
State of Co	ounty of					
Notary Signature:						
Signer #2 Choose one:	or Parent A	☐ Father o	r Parent B			
Printed name:						
Signature:		,	amp			
Street address:			======================================			
City/State/Zip:			Ses			
Subscribed to before me on State of Co		of	20 N	eal, indicate in	which state yo	notary is using a raised u are registered as a nission expires. Notary

notary and the date your commission expires. Notary signature and seal must appear in this form. Do not attach a separate notary statement.

Notary Signature:

Oregon Record as Evidence:

Mail:

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Oregon Vital Records

Amendments Unit

Portland OR 97293

PO Box 14050

Current/Past marriage record for evidence:

If the evidence document is a marriage, parent's birth, older sibling's birth, your own, or your child's birth record filed in Oregon Vital Records, fill in the applicable sections below. We will locate the record in our files and determine whether it is acceptable. You may list multiple records in case one does not list a full name or meet the required criteria. Out of state or country records are not accessible to our office and the original record will need to be submitted.

Husband/Spouse A full name:			
Wife/Spouse B full maiden name: _			
Marriage date:	Place (city/county): Ore		
Husband/Spouse A full name:			
Wife/Spouse B full maiden name: _			
Marriage date:	Place (city/county):	Oregon	
Birth record for evidence: Relationship refers to how the per	son on the record for evidence is re	lated to person on the record being corrected.	
Full name of child listed on record (for	or evidence):		
Date of birth:	Place (city/county):	Oregon	
Relationship: This person is the		of the person on record being corrected.	
Full name of child listed on record (for	or evidence):		
Date of birth:	Place (city/county):	Oregon	
Relationship: This person is the		of the person on record being corrected.	
Full name of child listed on record (fo	or evidence):		
Date of birth:	Place (city/county):	Oregon	
Relationship: This person is the		of the person on record being corrected.	
	be used for minor corrections. Mor ion, visit the "Change a Record" me	re extensive corrections will require a court order or a enu at www.HealthOregon.org/chs .	

You can get this document in other languages, large print, braille or a format you prefer. Contact the Center for Health Statistics at 971-673-1190. We accept all relay calls or you can dial 711.

Oregon Vital Records

800 NE Oregon Street

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Portland OR 97232

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Drop Box: