

**REQUEST TO CHANGE BIRTH CERTIFICATE  
BASED ON COURT ORDER OF NAME CHANGE**

**I hereby request the Center for Health Statistics to change the name on the Oregon birth certificate as stated in the court ordered decree of name change:**

<b>Name Now on Birth Certificate:</b>  First _____ Middle _____ Last _____	
<b>New Name as it is to appear on Birth Certificate:</b>  First _____ Middle _____ Last _____	
<b>Date of Birth:</b>  _____ <small>(Month/Day/Year)</small>	<b>Place of Birth:</b>  _____ <small>(City)</small> <b><u>OREGON</u></b> <small>(State)</small>
<b>Mother's Maiden Name:</b>  First _____ Middle _____ Last _____ <small>(Maiden)</small>	

\_\_\_\_\_  
Signature of person on birth certificate or parent if under age 18

\_\_\_\_\_  
Date signed

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Relationship to person on birth certificate

\_\_\_\_\_  
Daytime Telephone Number

This signed form and a certified copy of the court order showing the original seal and signature of the court clerk (our office will keep this document in a sealed file) must be returned with appropriate fee to:

**Amendment Clerk  
Center for Health Statistics  
PO Box 14050  
Portland, OR 97293-0500**