



Affidavit of Correction

This is a legal document. Complete in ink and do not alter

CLEAR FORM

PRINT

Mail to: Multnomah County
501 SE Hawthorne Blvd
Portland, OR 97214

Required information must match current information on record		
Required	Record type: ☐ Marriage ☐ State Domestic Partnership	
	1.Name on Record Party A	4.Date of Event
	2.Name on Record Party B	5.Date Issued
	3.Name of Person Requesting Correction	6.Relationship to Person on Record
		7.Place of Event
		8.Document Record #
		☐ Self ☐ Parent ☐ Guardian ☐ Grand Child ☐ Other
Return Mailing Address		
Telephone number		
Email Address		
Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows		
The record currently shows		The true fact is
9.	10.	
11.	12.	
13.	14.	
I declare under penalty of the laws of the State of Oregon that the foregoing is true and correct		
15a. Signature		15b. Signature of 2 nd party (if required)
Printed name	Date	Printed name
		Date
Required documentary proof must be submitted with the affidavit and must include full name and birth date. Examples of proof include:		
- Birth Record - Certificate of Naturalization		- Passport - Green/Permanent Resident Card (I-551)
Driver's License, Social Security Card or hospital decorative birth certificate cannot be used as proof		

By signing above, I acknowledge that knowingly or intentionally providing false or misleading information on a public record could be considered a crime under ORS 165.007 and ORS 165.013, and constitute a class C felony.

THIS INSTRUMENT WAS ACKNOWLEDGED BEFORE ME ON THIS _____ DAY OF _____

BY _____

NOTARY STAMP OR SEAL

NOTARY PUBLIC – STATE OF _____

MY COMMISSION EXPIRES _____

OFFICE USE ONLY

Printed Name	Date
Signature	Documentation: