COURT ORDER TO AMEND A WISCONSIN MARRIAGE CERTIFICATE

- This is a two page form and must be printed back to back.
- Type or print in <u>black ink only</u>.
- No erasures, cross-outs, correction fluid, or correction tape are allowed on this form. If a mistake is made, prepare another form.
- This form cannot be used to change a name. It can only be used to: (1) complete a name when part of that name has been omitted, and/or (2) amend the spelling of a name on a marriage certificate.
- For additional information regarding this form, please call (608) 266-1373.

PENALTIES: Any person who willfully and knowingly supplies any false information with the intent that the information be used in the preparation or amendment of a marriage certificate shall be fined not more than \$1,000 or imprisoned not more than 90 days, or both, per s. 69.24(2), Wis. Stats.

STATE OF WISCONSIN		COUNTY, BRANCH						
IN RE:	CORRECTION OF MARRIAGE CERTIFICATE PURSUANT TO CHAPTER 69.12, WISCONSIN STATUTES							
CONCERNING	(Name of subject on marriage certificate)	and (Name of subject on marriage certificate)						
Upon the records, files, and any proceedings in the above-named matter and based upon the petition of , who is the								
	(name of petitioner)	(relationship of petitioner to the subject of the record)						
of the Subject	of the Record, dated	, and which includes supporting						
evidence prese	ented to the court as follows: 1-3, list the evidence used to support the petition. Co <u>A CURRENT CERTIFIED COPY OF THE ORIGINAL</u> <u>REGISTRAR</u> showing the following information:							
2.								
3.	List other evidence:							

IT IS ORDERED that the State Registrar amend the above-identified marriage certificate so as to correctly reflect the facts at the time of the marriage as indicated on the second page of this form.

THE **INCORRECT** INFORMATION BELOW SHALL BE AMENDED TO THE CORRECT INFORMATION BELOW

(Name of subject) (First, Middle, LAST NAME IN CAPITAL LETTERS)			(Name of subject) (First, Middle, LAST NAME IN CAPITAL LETTERS)						
(Name of subject) (First, Middle, LAST NAME IN CAPITAL LETTERS)			(Name of subject) (First, Middle, LAST NAME IN CAPITAL LETTERS)						
(other – specify)				(other – specify)					
(other - specify)				(other - specify)					
(other - specify)				(other - specify)					
(other - specify)				(other - specify)					
(other - specify)				(other - specify)					
FOR COURT USE ONLY									
COURT SEAL	Case Number (MANDATORY)	Effective Date (MM/DD/YYYY)		County		State Wisconsin			
	SIGNATURE – Circuit Court Judge		Date Signed						
Court Seal Must Be Present									
FEE AND MAILING INFORMATION									
Mandatory fee to amend the marriage certificate									
Number of Additional Copies Make check or money order payable to: State of Wis. Vital Records TOTAL									
Send this properly completed, signed, sealed form and your check or money order to:									
	State Vital Records Office / A			Madison, WI 537	01-0309				
SEND CERTIFIED COPY OF THE AMENDED MARRIAGE CERTIFICATE TO: NAME DAYTIME TELEPHONE NUMBER									
		(()						
STREET ADDRESS or P.O. BOX			CITY		STATE	ZIP CODE			