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| R-118 07012024 | ***Applicant Affidavit to Remove Sex Designations on a Marriage Certificate***  Registry of Vital Records and Statistics  Massachusetts Department of Public Health | | | | | ***MADPH_Logo*** |
| **Information on existing marriage certificate** | Party A: *First Middle Last* | | | | | |
| Party B: *First Middle Last* | | | | | |
| City/Town where Marriage Intentions were Filed | Date of Marriage: | | | | |
| **Names to appear on amended record (if legal change of name)** | Party A: *First Middle Last* | | | | | |
| Party B: *First Middle Last* | | | | | |
| **Applicant’s contact information** | Mailing Address: | | | | | |
| Telephone (optional): | | Email (optional): | | | |
| **Applicant affidavit** | I hereby request a permanent amendment of my marriage certificate registered in Massachusetts. I understand that a new record will be issued that does not contain Sex of Party fields for either party and will reflect my/our correct name(s) if accompanied by a legal change of name decree.  In addition to this Affidavit, I am also submitting:   * A court-certified copy of my legal name change decree (if applicable); and * A check or money order if fee is required. | | | | | |
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| I declare under the pains and penalties of perjury that the information above is true and accurate and not made for any fraudulent purpose. Upon signing, I am authorizing a permanent change to the marriage certificate as listed above.  X | | | | | |
| Signature of Party A | | |  | Date | |
| X | | |  |  | |
| Signature of Party B | | | Date | |
| **For more information or to apply** | An application for amendment may be submitted by mail or by making an appointment at the city or town hall where you filed your Notice of Intention to Marry (where you applied for and received your marriage license). Fees for amendments and certified copies vary by community.  For more information, contact the city or town directly or the Registry of Vital Records and Statistics.  A list of city and town websites can be found at this link:  <https://www.mass.gov/lists/massachusetts-city-and-town-websites>  Registry of Vital Records and Statistics  Telephone: (617) 740-2600  Email: [RVRSAmendments@mass.gov](mailto:RVRSAmendments@mass.gov) | | | | | |