

INSTRUCTIONS FOR LEGITIMATION OF BIRTH CERTIFICATE

We can make a new birth certificate for your child and add the name of the NATURAL father, if no father is listed on the present birth record, and if the mother was not married at the time of conception or birth or anytime in between.

PLEASE SEND:

- 1. CERTIFIED COPY of the parent's marriage license, dated AFTER the child's Birth. (You may get a certified copy of the license from the County Clerk where the original license was issued.) Do not send the original license or an un-certified copy.**
- 2. AFFIDAVIT signed by BOTH parents in the presence of a Notary Public. Use the affidavit form enclosed.**
- 3. \$27.00 for the first copy of the new certificate. Additional copies are \$10.00 each**
- 4. INFORMATION about the NATURAL FATHER. (See Affidavit)**

SEND THE ABOVE MATERIALS TO:

**Arkansas Dept. of Health & Vital Records
Amendment Section
4815 W Markham St, SLOT 44
Little Rock AR 72205-3867**

**YOU MAY CONTACT THIS OFFICE BY CALLING (501) 682-1214
Sincerely,**

Amendments Group

AFFIDAVIT FOR LEGITIMATION OF BIRTH CERTIFICATE

This affidavit must be signed by both parents, in the presence of a Notary Public, and must be accompanied by the parents' marriage license. The marriage license must be dated AFTER the Child's date of birth, and must be certified from the County Clerk's Office where the license was issued.

State of _____

County of _____

We, the natural parents of _____, born in _____ Arkansas on _____
(TOWN) COUNTY (Month) (Day) (Year)

Wish to have our child carry the surname as indicted on the line on the bottom of the page. We also wish for the new birth certificate to show the father's information as we have listed below and the new name for the child as listed below.

NATURAL FATHER'S INFORMATION:

Full name: _____ (Mother's signature)

Race: _____

Date of Birth: _____ (Father's signature)

Birth State: _____

Occupation: _____
(at the time child was born)

The child's last name is to be _____.

Subscribed and sworn to before me this _____ day of _____ 20_____.

Seal _____
(Notary Public signature)

My commission expires: _____