



## VITAL RECORDS

OFFICE OF COOK COUNTY CLERK KAREN A. YARBROUGH

P.O. Box 641070, Chicago, Illinois 60664-1070

TEL 312.603.7788 WEB [cookcountyclerk.com](http://cookcountyclerk.com)

# Request for Nongendered Copy of a Marriage Certificate Affidavit

I, \_\_\_\_\_ state that I am a named spouse on a marriage license held in this office, that I  
*Name of Requestor*  
am still married to the other named spouse on that marriage license as of the date of this request, and hereby request the  
holder of this record provide me, and only me, with a marriage certificate with any gender-identifying language removed  
or changed to "spouse". I affirm that this change is for purposes of this certified copy, the change will not be made to  
permanent records, and a record of this request shall be held by the holder of this marriage record.

\_\_\_\_\_  
*Name of Spouse A*

\_\_\_\_\_  
*Name of Spouse B*

\_\_\_\_\_  
*Date Ceremony Occurred*

\_\_\_\_\_  
*Cook County Clerk's Office Marriage License Number*

\_\_\_\_\_  
*Signature of Requestor*

\_\_\_\_\_  
*Date Signed*

PLEASE AFFIX COUNTY SEAL BELOW

## FOR CLERK'S OFFICE USE ONLY

\_\_\_\_\_  
*Name of Clerk's Office Employee who Processed Request*

\_\_\_\_\_  
*Date Request Processed*

\_\_\_\_\_  
*License Number for License Issued*



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# 2-Party Request - Gender Change on Marriage Certificate Affidavit

We, \_\_\_\_\_ and \_\_\_\_\_, the still-married named  
*Name of Spouse A* *Name of Spouse B*  
persons on a marriage license held in this office as of the date of this request, hereby request the holder of this record to  
provide a marriage certificate with gender-identifying terms such as "bride" and "groom" changed as follows:

\_\_\_\_\_  
*Name of Spouse A* **Select One:**  Bride  Groom  Spouse

\_\_\_\_\_  
*Name of Spouse B* **Select One:**  Bride  Groom  Spouse

\_\_\_\_\_  
*Date Ceremony Occurred*

\_\_\_\_\_  
*Cook County Clerk's Office Marriage License Number*

We affirm that this change is for purposes of this certified copy, and the change will not be made to permanent records, unless  
indicated by selecting  YES or  NO (*SELECT ONE*) and a record of this request shall be held by the holder of this marriage record.

\_\_\_\_\_  
*Signature of Spouse A*

\_\_\_\_\_  
*Signature of Spouse B*

\_\_\_\_\_  
*Date Signed*

PLEASE AFFIX COUNTY SEAL BELOW

### FOR CLERK'S OFFICE USE ONLY

\_\_\_\_\_  
*Name of Clerk's Office Employee who Processed Request*

\_\_\_\_\_  
*Date Request Processed*

\_\_\_\_\_  
*License Number for License Issued*