

NAME EQUALITY ACT INFORMATION SHEET

Please read prior to completing your marriage license application.

Effective January 1, 2009, The Name Equality Act of 2007 (AB 102, Chapter 567, Statutes of 2007) gives specific rights to parties who are applying for their California marriage license, to choose and list on the marriage license, the new name(s) that each party will go by after marriage (Family Code 306.5) This new law only pertains to marriage licenses issued on or after January 1, 2009 and does not apply to marriage licenses issued prior to that date.

NOTE: Parties are not required to have the same name, nor are they required to change their name. If one or both of the parties want to have their new name(s) shown on their marriage license, the new name must be entered on the marriage license application at the time they are applying for their marriage license. The name you indicate on your marriage license application will be your name on the marriage license certificate and cannot be changed by the County Clerk. If you do not indicate a new name on your marriage license, a court order might be required to do a name change.

IMPORTANT:

- You may not change your first name using this process.
- You may not amend the marriage license after you have been married, to add or change the name you wish to be known as.

County Clerk staff cannot advise you how to complete the marriage license application as it relates to your entry of a new name or the retention of your former name on the marriage license application. For your protection, if you have any questions regarding whether you should or should not list your new name on the marriage license application, and/or how the Name Equality Act of 2007 may affect you, please consult an attorney prior to applying for your marriage license.

The marriage certificate is used by multiple local, state, federal and private agencies, each of which have different rules and or regulations regarding what documents are acceptable to change your name on their records following marriage. It is recommended that you contact these agencies to verify their requirements prior to applying for your marriage license.

Sign to acknowledge that you have read the above information sheet regarding the Name Equality Act of 2007.

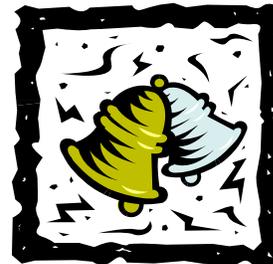
First Person: _____

Second Person: _____

CONFIDENTIAL MARRIAGE APPLICATION

PLEASE PRINT OR WRITE LEGIBLY

(Confidential Application \$60.00)



Qualifications to obtain this type of license:

1. Need to be at least 18 years of age.
2. Applicants must be living together as spouses.

Both of these qualifications must be met to purchase this type of license.

Are you getting married within 90 days? Yes _____ No _____

Do you need to re-register to vote because of a name or address change? Yes _____ No _____

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|---|--|--|------------------------------|--|--|--|--|--|
| FIRST PERSON DATA | 1A. FIRST NAME: | | 1B. MIDDLE NAME: | | 1C. CURRENT LAST NAME: | | 1D. LAST NAME AT BIRTH: <small>(IF DIFFERENT THAN 1C)</small> | |
| | 2. DATE OF BIRTH: <small>(MM/DD/YYYY)</small> | | 3. STATE/COUNTRY OF BIRTH: | | 4. NUMBER OF PREVIOUS MARRIAGES/SRDP: | | 5A. LAST MARRIAGE/SRDP ENDED BY: <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> ANNULMENT <input type="checkbox"/> TERMINATION OF SRDP <input type="checkbox"/> DEATH <input type="checkbox"/> N/A | |
| | 6. ADDRESS: | | 7. CITY: | | 8. STATE/COUNTRY: | | 9. ZIP CODE: | |
| | 10A. FULL BIRTH NAME OF FATHER/PARENT: | | 10B. STATE/COUNTRY OF BIRTH: | | 11A. FULL BIRTH NAME OF MOTHER/PARENT: | | 11B. STATE/COUNTRY OF BIRTH: | |
| OPTIONAL: <input type="checkbox"/> GROOM <input type="checkbox"/> BRIDE | | | | | | | | |

| | | | | | | | | |
|---|---|--|------------------------------|--|--|--|---|--|
| SECOND PERSON DATA | 12A. FIRST NAME: | | 12B. MIDDLE NAME: | | 12C. CURRENT LAST NAME: | | 12D. LAST NAME AT BIRTH: <small>(IF DIFFERENT THAN 12C)</small> | |
| | 13. DATE OF BIRTH: <small>(MM/DD/YYYY)</small> | | 14. STATE/COUNTRY OF BIRTH: | | 15. NUMBER OF PREVIOUS MARRIAGES/SRDP: | | 16A. LAST MARRIAGE/SRDP ENDED BY: <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> ANNULMENT <input type="checkbox"/> TERMINATION OF SRDP <input type="checkbox"/> DEATH <input type="checkbox"/> N/A | |
| | 17. ADDRESS: | | 18. CITY: | | 19. STATE/COUNTRY: | | 20. ZIP CODE: | |
| | 21A. FULL BIRTH NAME OF FATHER/PARENT: | | 21B. STATE/COUNTRY OF BIRTH: | | 22A. FULL BIRTH NAME OF MOTHER/PARENT: | | 22B. STATE/COUNTRY OF BIRTH: | |
| OPTIONAL: <input type="checkbox"/> GROOM <input type="checkbox"/> BRIDE | | | | | | | | |

| NEW MIDDLE AND/OR LAST NAME OF PERSON LISTED IN 1A-1D (If any) | | |
|--|------------------|----------------|
| 23A. First Name- (Must be same as 1a) | 23B. Middle Name | 23C. Last Name |

| NEW MIDDLE AND/OR LAST NAME OF PERSON LISTED IN 12A-12D (If any) | | |
|--|------------------|----------------|
| 24A. First Name- (Must be same as 12a) | 24B. Middle Name | 24C. Last Name |

| | | |
|------------------|---|---|
| AFFIDAVIT | WE, THE UNDERSIGNED CURRENTLY LIVING TOGETHER AS SPOUSES, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF. WE FURTHER DECLARE THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR TO THE ISSUANCE OF A LICENSE IS KNOWN TO US. WE ACKNOWLEDGE RECEIPT OF THE INFORMATION REQUIRED BY CALIFORNIA FAMILY CODE §358 AND HEREBY APPLY FOR A LICENSE AND CERTIFICATE OF CONFIDENTIAL MARRIAGE. | |
| | 25. SIGNATURE OF FIRST PERSON ▶ | 26. SIGNATURE OF SECOND PERSON ▶ |

Home Phone Number: _____ Date: _____

First Person's Work Phone: _____ Second Person's Work Phone: _____

FOR OFFICE USE ONLY (Circle all that apply)

\$60 License \$40 Ceremony
 \$20 Certified Copy \$40 Deputization Total Paid: \$ _____ IDs verified by: _____
 (1) Ring (2) Rings No Rings Is ceremony here? Yes No License typed by: _____