Maryland
DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Meena Seshamani, M.D., Ph.D., Secretary

Dear Customer,

Thank you for your request of a certified copy of a Maryland Certificate of Live Birth. On the original certificate there is no given name on record**. If you would like to add the full given name to the birth certificate, please complete and sign before a Notary Public the enclosed Affidavit to Add a Given Name to the Certificate of Live Birth.** If the person whose name to be added is 1-7 years of age, only the notarized affidavit signed by a parent must be submitted. If the person whose name is to be added is 7 years of age or older, the complete affidavit and two documents showing the full given name from the list below must be submitted. The documents must show your full maiden name.

* Baptismal Certificate
* Life Insurance Policy
* Pre-Kindergarten or Grade school records
* Social Security Card
* Voter's card
* Hospital Admission record
* Physician's office record
* Clinic or immunization record
* Your Marriage Certificate
* Your Child's Birth Certificate
* Census Record
* DD-214
* Court Order

Photocopies of the documents are acceptable if they show all the required information. All documents submitted as evidence will be retained by the Division of Vital Records.

There is a $10.00 to purchase the certified birth certificate. Please complete the birth application include a check or money order made payable to the Division of Vital Records and a legible copy of a valid government issued identification (passport or driver's license). If you have an uncertified copy of the current birth certificate in your possession you may return it to be exchanged at no additional charge.

If you have any questions concerning this matter, please contact 410-764-3038.

Sincerely,
Legal Document Processing Unit
DIVISION OF VITAL RECORDS
6764-B Reisterstown Road • Baltimore, Maryland 21215-2306

MARYLAND DIVISION OF VITAL RECORDS

Affidavit to Add a Given Name to a Certificate of Live Birth

Section One: Applicant Information

_____ of _____
Name Address

_____ _____
Telephone Email address

Disposes and says that they are the

_____ Person named on certificate
_____ Parent or Guardian of person named on certificate
_____ Attorney for person named on certificate

Name of person on certificate _____

Who was born at _____ in _____
Name of Institution Baltimore City or Maryland County

On _____ Child of _____ and _____
Month Day Year Parent 1's Full Name Parent 2's Full Name

State File Number: _____

Section Two: Information on Full Given Name

No Scratch Outs or White Outs – Document will be Voided

Affiant further states that the birth certificate noted above does not list the given name of the subject, and that the information listed below is correct and should be added to the original Certificate of Live Birth.

Full Given Name as it should appear on the original certificate:

_____
First **Middle** **Last**

Section Three: Notary Public Information

Affiant further states that they are making this request of their own free will. If under the age of 18, a parent or guardian must sign:

_____ (Parent or Guardian)

Signature _____ (Affiant, if 18 years of age or older)

Sworn to before me this _____day of _____ 20_____. My Commission expires _____

_____
Signature of Notary Public Seal

SUBSEQUENT CORRECTIONS OR ADDITIONS MAY REQUIRE A COURT ORDER

6764-B Reisterstown Road • Baltimore, Maryland 21215-2306-2306 • Tel:410-764-3038