

State of MaineOffice of the Secretary of State

OFFICE USE ONLY

Marriage Officiant License #:

Marriage Officiant Information Change

| Name as it appears on the record (first, middle, last, s | suffix) |
|--|--|
| Current name, if different (first, middle, last, suffix) | |
| Date of Birth: | |
| Address on record: | Current Address (if different): |
| Home Address (Physical location - street, city/town, state, and zip code): | Home Address (Physical location - street, city/town, state, and zip code): |
| Mailing Address (if different) | Mailing Address (if different) |
| Contact Information on record: | Current Contact Information, if different: |
| E-mail address: | |
| Home Telephone: () | Trome receptione. |
| Work Telephone: () | Work Telephone: () |
| I certify that the information in this Marriage Off | ficiant Information Change form is true and correct. |
| Signature of Applicant | Date: |

Please submit this completed form by fax to (207) 287-5874, by email to cec.notaries@maine.gov or by mail to Secretary of State, 101 State House Station, Augusta, ME 04333-0101.