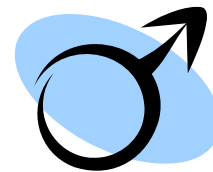




# Obtaining A New Birth Certificate After Gender Reassignment



Upon request, this document will be made available in Braille, large print, and audiocassette or computer disk. To obtain a copy in one of these alternate formats, please call or write:

California Office of Vital Records  
M.S. 5103  
P.O. Box 997410  
Sacramento, CA 95899-7410  
Telephone: (916) 445-2684  
California Relay: 711/1-800-735-2929  
[www.cdph.ca.gov](http://www.cdph.ca.gov)

October 2008

# Obtaining a New Birth Certificate After Gender Reassignment

---

## What is a gender reassignment?

- “Gender **reassignment**” is when a person has his or her sexual characteristics surgically altered to those of the opposite sex.
  - This is not the same as “gender **error**,” which is when a person’s sex is **incorrectly stated** on the original birth certificate by the person preparing the certificate and registering the birth.
- 

## I have undergone gender reassignment.

### What is my next step toward amending my birth certificate?

A petition to have a new birth certificate issued that reflects the change of gender (and name if requested) must be filed with the Superior Court in the county where you reside (does not have to be in California, but must be in a U.S. territory) (Health and Safety Code Section 103425).

- If you have already obtained a legal name change prior to filing your petition for a new birth certificate, your petition to the court must include an affidavit of a physician documenting the gender reassignment, and a certified copy of the court order changing your name (Health and Safety Code Section 103430).
  - In lieu of separate proceedings, you can file a single petition with the court for a name change and the issuance of a new birth certificate that reflects a change of gender (Health and Safety Code Section 103435). In this case, your petition to the court must include an affidavit of a physician documenting the gender reassignment.
- 

### How do I file a petition with the court?

- We suggest you contact a family law attorney for legal advice in this matter. Our staff cannot provide legal advice, nor do we have information about the legal process.
  - There are also books available at bookstores or public libraries to help you with the court process.
  - You can also access the following website for additional information about the court process: [www.courtinfo.ca.gov](http://www.courtinfo.ca.gov).
-

**After I get the court order, what do I submit to amend my birth certificate?**

- You will need to complete an Affidavit to Amend a Record, VS 24.
- You **must** include a **certified** copy of the court order gender reassignment and, if applicable, the court order name change. (See next section for explanation of “certified” copy.)

We do not return the court orders after the new birth certificate is prepared.

- Although this item is not required, it would help our staff if you could include a photocopy of the current birth certificate if you have it (this helps us identify the exact record to be amended).
- Mail the following items to our office using the address on the front of this pamphlet:
  - Completed VS 24
  - \$ 20 fee
  - **Certified** copy of the court order
  - Photocopy of current birth certificate (if you have it)
- ***If any of the required items are not included, your request will be returned to you for correction.***

**What is a “certified” copy of the court order?**

1. A “certified” copy of the court order must be a **copy** of the order that was originally prepared by the court. ***It cannot be an original printout.***

If the court gives you an original printout, please ask them to make a photocopy.

2. The photocopy that the court gives you must have:
  - a. An **original** court seal.
  - b. A signature (or signature stamp) of the judge.
  - c. A signature (or signature stamp) of the court clerk.

**IMPORTANT:**

- ✓ The “certified” copy must have an **original** court seal and a signature (or signature stamp) of the court clerk. It’s the **original** seal and court clerk signature (certification) that make this a “certified” copy.

(Continued)

**What is a “certified” copy of the court order?**

(Continued)

- ✓ Do not send us a copy where the court seal has been photocopied. The court seal must be an **original** seal.
- ✓ The court seal and signature must appear on the actual certified copy (either front or back) – and not on a blank sheet of paper.

**What is the fee for a new birth certificate after gender reassignment?**

- \$20 – which includes one Certified Copy of the new birth certificate.
- Additional copies are \$14 each.
- Fees should be paid by check or money order payable to **Office of Vital Records**. International money orders for out-of-country requests should be payable in U.S. dollars.

**Where can I get the VS 24?**

The application must be an **original** form (our office uses a special bond paper). **Photocopies are not acceptable**. One application form is included if you receive this pamphlet by mail. If you need additional copies of the VS 24 form, or are accessing this pamphlet on our website:

- Order forms electronically at:  
<http://apps.cdph.ca.gov/AutoForm2/default.aspx?af=1184>. Because of the volume of phone calls we receive, the internet is usually a faster process for our customers than calling our Customer Service Unit.
- Call our Customer Service Unit at (916) 445-2684.
- You can also get the form from the County Recorder or County Health Department in any California county.

**How do I complete the VS 24?**

A sample of what a completed form should look like is attached.

**PART I:**

- Complete the information **exactly** as it appears on the current birth certificate.

**Note:** If you need a copy of the current birth certificate to complete this section, you can get a copy by completing the Application for Certified Copy of Birth Certificate (attached) and submitting the application (and \$14 fee) to our office. Our average processing time for birth certificates is 12 weeks. But you can get a copy much faster from the County Recorder in the county where the birth took place.

(Continued)

**How do I  
complete the  
VS 24?**

(Continued)

---

**PART II:**

**Item 8:** Enter the item number from the current birth certificate that needs to be corrected. List only one item per line.

**Item 9:** Enter the *incorrect* information **as it appears** on the current birth certificate.

**Item 10:** Enter the *correct* information **as it should appear** on the birth certificate.

**Item 11:** Enter the Superior Court information (county, case number, etc.) for the court that ordered a new birth certificate reflecting a change of gender and, if applicable, a court order name change.

**Items 12:** Enter your personal information and signature.

- Contrary to the instructions on the VS 24, two signatures **are not required** when using this form for gender reassignment.

**What makes a  
VS 24 form  
“acceptable”?**

---

**Important Information**

Birth certificates are legal documents that must be able to hold up in any court, unchallenged as to their accuracy and reliability. To help us prepare the new birth certificate accurately:

- Every item on the amendment must be completed.
- The amendment form must be an original, not a photocopy.
- We must be able to read the information on the form. It is extremely important that the form be legible. **Using a typewriter to complete the form ensures that the information is interpreted clearly.**
- If you are not able to type the amendment, it is extremely important that you take the extra time to print **very clearly and legibly**. Documents that are not legible will be returned to you to complete again.
- **Only black ink is acceptable.**
- **There cannot be any erasures, whiteout, or alterations.**

---

**How long will it take to get my new birth certificate?**

Our processing time for birth amendments is approximately 7 months. (The processing time can change based on our workload.)

---

**Once I file the amendment, what happens to my original birth certificate?**

- When we receive the acceptable documents (and fee), we'll seal the original birth certificate and replace the sealed record with a new birth certificate.
  - The new birth certificate will in no way indicate that it is not the original birth certificate.
  - The new birth certificate will be the only birth certificate available to the public. (The original sealed record will only be available through a court order – per Health and Safety Code Section 103440.)
- 

**What if I still have questions?**

If you have read this pamphlet thoroughly and still have questions that were not answered in this pamphlet, please call (916) 557-6076 and leave your name, telephone number, and question. One of our Amended Records staff will return your call within 48 hours.

If you have questions on the **status** of your request, please call our Customer Service Unit at (916) 445-2684 – **but only after the processing time has passed.**

---

## Note to Customer:

We *cannot process your request* unless you complete *both sides* of the enclosed amendment form. The information on both sides is important information for our records, and *both sides must be completed in order to process your request*. Thank you.

\* \* \*

## Atencion al Cliente:

Nosotros *no podemos procesar su solicitud* a menos que usted complete *ambos lados* de la forma de la enmienda. La informacion en ambos lados es informacion importante para nuestros registros y *ambos lados deben ser completados para procesar su solicitud*. Gracias.

California Office of Vital Records  
Oficina de Registros Vitales de California

---

The following information pertains to the Office of Vital Records:  
La informacion siguiente pertenece a la Oficina de Registros Vitales:

**Note to Vital Records Staff:**

Include this flyer when mailing the following forms or pamphlets:

VS 22	Acknowledgement of Paternity
VS 23	Court Order Name Change
VS 24	Affidavit to Amend a Record
VS 24C	Affidavit to Amend a Marriage Record
VS 85	Delayed Registration of Birth
VS 107	Supplemental Name Report – Birth

# AFFIDAVIT TO AMEND A RECORD

NO ERASURES, WHITEOUTS, PHOTOCOPIES,  
OR ALTERATIONS

STATE FILE NUMBER \_\_\_\_\_

LOCAL REGISTRATION NUMBER \_\_\_\_\_

BIRTH     DEATH     FETAL DEATH

**TYPE OR PRINT CLEARLY IN BLACK INK ONLY – THIS AMENDMENT BECOMES AN ACTUAL PART OF THE OFFICIAL RECORD**

## PART I INFORMATION TO LOCATE RECORD

INFORMATION AS IT APPEARS ON ORIGINAL RECORD	1A. NAME—FIRST		1B. MIDDLE		1C. LAST	
	2. SEX	3. DATE OF EVENT—MM/DD/CCYY	4. CITY OF EVENT		5. COUNTY OF EVENT	
	6. FULL NAME OF FATHER/PARENT AS STATED ON ORIGINAL RECORD			7. FULL NAME OF MOTHER/PARENT AS STATED ON ORIGINAL RECORD		
	SAMPLE					

## PART II STATEMENT OF CORRECTIONS TO BIRTH, DEATH, OR FETAL DEATH RECORD

	8. ITEM NUMBER TO BE CORRECTED	9. INCORRECT INFORMATION THAT APPEARS ON ORIGINAL RECORD	10. CORRECTED INFORMATION AS IT SHOULD APPEAR
LIST ONE ITEM PER LINE			

REASON FOR CORRECTION	11.

**We, the undersigned, hereby certify under penalty of perjury that we have personal knowledge of the above facts and that the information given above is true and correct.**

AFFIDAVITS AND SIGNATURES  <b>TWO PERSONS MUST SIGN THIS FORM TO CORRECT A BIRTH, DEATH, OR FETAL DEATH RECORD</b>	12A. SIGNATURE OF FIRST PERSON		12B. PRINTED NAME		12C. TITLE/RELATIONSHIP TO PERSON IN PART I	
	12D. ADDRESS (STREET and NUMBER, CITY, STATE, ZIP)		12E. DATE SIGNED—MM/DD/CCYY			
	13A. SIGNATURE OF SECOND PERSON		13B. PRINTED NAME		13C. TITLE/RELATIONSHIP TO PERSON IN PART I	
	13D. ADDRESS (STREET and NUMBER, CITY, STATE, ZIP)		13E. DATE SIGNED—MM/DD/CCYY			

STATE/LOCAL REGISTRAR USE ONLY	14. OFFICE OF VITAL RECORDS OR LOCAL REGISTRAR	15. DATE ACCEPTED FOR REGISTRATION

# APPLICATION TO AMEND A RECORD

TYPE OR PRINT CLEARLY IN BLACK INK ONLY  
NO ERASURES, WHITEOUTS, PHOTOCOPIES, OR ALTERATIONS

If an *acceptable* application to amend the record is registered within one year of the date of the event, there is no processing fee; however, there is a fee required for a certified copy.

Enclosed is the fee of \$ \_\_\_\_\_ for a certified copy of the newly amended record.

If an *acceptable* application to amend the record is registered one year or more after the date of the event, there is a fee for filing the affidavit, which includes one certified copy. There is a fee for each additional certified copy. Please contact your Local Registrar, County Recorder, or the State Registrar for the current fees, or visit our website at [www.cdph.ca.gov](http://www.cdph.ca.gov).

Enclosed is the fee of \$ \_\_\_\_\_ for filing the affidavit and one certified copy of the newly amended record.

Enclosed is the fee of \$ \_\_\_\_\_ for an additional certified copy(ies) of the newly amended record.

Printed Name of Applicant \_\_\_\_\_

Mailing Address of Applicant \_\_\_\_\_

Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_

City, State, ZIP Code \_\_\_\_\_

## GENERAL INFORMATION

1. The original certificate cannot be altered.
2. ***This amendment becomes a part of the original record, so please type or print clearly in black ink only.***
3. Please submit original amendment form only. Photocopies of the amendment form will be rejected.
4. Your certified copy will include a copy of the original certificate with a copy of the amendment.
5. ***The certified copy of the certificate and the attached amendment must remain together for the certified copy to be valid.***

## READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING THE FORM

1. ***This form becomes a part of the original record – type or print clearly in black ink only.***
2. No erasures, whiteouts, photocopies, or alterations allowed.
3. Enter the Local Registration Number in the space provided in the upper right-hand corner of the form.
4. Complete Part I, Items 1 – 7, with the information as it appears on the original certificate.
5. Enter the certificate item number(s) to be corrected, either from the original or subsequent amendment, in Part II—Item 8. List one item per line.
6. Enter the incorrect information that appears on the original certificate in the line(s) provided below Item 9.
7. In Item 10, enter the correct information as it should appear for each item listed in Item 9.
8. Enter the reason for the correction in Item 11.
9. Read the affidavit statement. Two persons who are certifying to the statement of corrections must sign the form.
10. Do not write in Items 14 or 15. This space is reserved for State or Local Registrar use only.
11. Make check or money order payable to the Office of Vital Records. When the paperwork is properly completed and signed by two parties, return this form, together with the required fee(s), to:

California Department of Public Health  
Office of Vital Records  
MS 5103  
P.O. Box 997410  
Sacramento, CA 95899-7410

**APPLICATION FOR CERTIFIED COPY OF BIRTH RECORD**

**DO NOT Complete This Application Before Reading the Instructions on Page 2**

In an attempt to stop the illegal use of vital records, and as part of statewide efforts to reduce identity theft, a new law (effective July 1, 2003) changed the way certified copies of birth certificates are issued. **Certified Copies** to establish the identity of a registrant can be issued only to authorized individuals, as indicated below. All others will be issued **Certified Informational Copies** that are not valid to establish identity.

Fee: **\$14 per copy** (payable to the Office of Vital Records).

Please indicate the type of certified copy you are requesting:

<input type="checkbox"/> I would like a <b>Certified Copy</b> . This copy will establish the identity of the registrant. (To receive a Certified Copy you <b>MUST INDICATE YOUR RELATIONSHIP TO THE REGISTRANT</b> by selecting from the list below <b>AND COMPLETE THE ATTACHED SWORN STATEMENT</b> declaring that you are eligible to receive the Certified Copy. The Sworn Statement <b>MUST BE NOTARIZED</b> if the application is submitted by mail <b>unless you are a law enforcement or local or state governmental agency.</b> )	<input type="checkbox"/> I would like a <b>Certified Informational Copy</b> . This document will be printed with a legend on the face of the document that states, <b>"INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY."</b>  <b>(A Sworn Statement does not need to be provided.)</b>
---	--

**NOTE: Both documents are certified copies of the original document on file with our office. With the exception of the legend, the documents contain the exact same information.**

To receive a **Certified Copy** I am:

- The registrant (person listed on the certificate) or a parent or legal guardian of the registrant.
- A party entitled to receive the record as a result of a court order, or an attorney or a licensed adoption agency seeking the birth record in order to comply with the requirements of Section 3140 or 7603 of the Family Code.
- A member of a law enforcement agency or a representative of another governmental agency, as provided by law, who is conducting official business. *(Companies representing a government agency must provide authorization from the government agency.)*
- A child, grandparent, grandchild, brother or sister, spouse, or domestic partner of the registrant.
- An attorney representing the registrant or the registrant's estate, or any person or agency empowered by statute or appointed by a court to act on behalf of the registrant or the registrant's estate. *(If you are requesting a Certified Copy under a power of attorney, please include a copy of the power of attorney with this application form.)*

<b>APPLICANT INFORMATION</b> (PLEASE PRINT OR TYPE)			<b>Today's Date:</b> _____		
Agency Name (if appropriate)	Agency Case No. (if appropriate)	Purpose of Request			
Printed Name <b>and Signature</b> of Applicant			Number of Copies	Amount Enclosed	
Mailing Address – Number, Street			Name of Person Receiving Copies, if Different from Applicant		
City	State / Province	ZIP Code	Mailing Address for Copies, if Different from Applicant		
Daytime Telephone (include area code) (    )		Country	City	State	ZIP Code

<b>BIRTH CERTIFICATE INFORMATION</b> (PLEASE PRINT OR TYPE)			<b>Adopted:</b> <input type="checkbox"/> No <input type="checkbox"/> Yes (If Yes, see #4 on Page 2)		
<b>BIRTH</b> Name on Certificate (LAST)	<b>FIRST</b> Name on Certificate	<b>MIDDLE</b> Name on Certificate			
City of Birth (must be in California)			County of Birth		
Date of Birth – MM/DD/CCYY (If unknown, enter approximate date of birth)			Sex <input type="checkbox"/> Female <input type="checkbox"/> Male		
<b>BIRTH</b> Name on Certificate – Father/Parent	<b>FIRST</b> Name on Certificate – Father/Parent	<b>MIDDLE</b> Name on Certificate – Father/Parent			
<b>BIRTH</b> Name on Certificate – Mother/Parent	<b>FIRST</b> Name on Certificate – Mother/Parent	<b>MIDDLE</b> Name on Certificate – Mother/Parent			

**INFORMATION:** Birth records have been maintained in the Office of the State Registrar of Vital Records since July 1, 1905.

*The “Birth” name required on Vital Records (see Items 1C, 6C, 7C, 9C, and 12C) is the name given at birth, or a name received through adoption, court-ordered name change, or Naturalization. AKA’s (Also Known As) and assumed names cannot be entered as the legal “Birth” name.*

**INSTRUCTIONS:**

1. As of July 1, 2003, **ONLY** individuals who are authorized by Health and Safety Code Section 103526 can obtain a Certified Copy of a Birth Record to establish identity of the registrant (person listed on the certificate). (Page 1 identifies the individuals who are authorized to make the request.) All others may receive a Certified Informational Copy which will be marked, “Informational, Not a Valid Document to Establish Identity.”

**Confidential Information on Birth Record:** Some individuals have special needs for a birth certificate that contains the confidential information provided at the time the birth record was prepared. This confidential information may be used to establish ethnicity, to provide health background, or for other personal reasons. For information on how to obtain a birth certificate containing the confidential information, please refer to the Birth Certificate section of our website: [www.cdph.ca.gov](http://www.cdph.ca.gov) (then select “Services”). Only specific individuals may obtain confidential copies.

2. Complete a separate application for each birth record requested.
3. Complete the **Applicant Information** section on Page 1 and provide your signature where indicated. In the **Birth Certificate Information** section, provide all the information you have available to identify the birth record. If the information you furnish is incomplete or inaccurate, we may not be able to locate the record.
4. **If the registrant has been adopted**, make the request in the **adopted** name. (If you’re requesting a copy of the **original** birth certificate, you **must** provide a court order releasing the original sealed record.)

5. **SWORN STATEMENT:**

- The authorized individual requesting the certified copy must sign the attached Sworn Statement, declaring under penalty of perjury that they are eligible to receive the certified copy of the birth record, and identify their relationship to the registrant – the relationship must be one of those identified on Page 1.
- If the application is being submitted by mail, the Sworn Statement **must be** notarized by a Notary Public. (To find a Notary Public, see your local yellow pages or call your banking institution.) **Law enforcement and local and state governmental agencies are exempt from the notary requirement.**
- You do not have to provide a Sworn Statement if you are requesting a Certified Informational Copy of the birth record.

6. Submit \$14 for **each** copy requested. If no birth record is found, the \$14 fee will be retained for searching the record (as required by law) and a “Certificate of No Public Record” will be issued to the applicant. Indicate the number of copies you want and include the correct fee(s) in the form of a personal check or postal or bank money order (International Money Order for out-of-country requests) made payable to the **Office of Vital Records**. Mail this application with the fee(s) to the Office of Vital Records at the address below.
7. **Returning Completed Certificates:** Completed certificates are returned using the U.S. Postal Service.

Office of Vital Records - MS 5103  
P.O. Box 997410  
Sacramento, CA 95899-7410  
(916) 445-2684

**SWORN STATEMENT**

I, \_\_\_\_\_, declare under penalty of perjury under the laws of the State of California,  
 (Applicant's Printed Name)

that I am an authorized person, as defined in California Health and Safety Code Section 103526 (c), and am eligible to receive a certified copy of the birth or death record of the following individual(s):

Name of Person Listed on Certificate	Applicant's Relationship to Person Listed on Certificate (Must Be a Relationship Listed on Page 1 of Application)

*(The remaining information must be completed in the presence of a Notary Public or Office of Vital Records staff.)*

Subscribed to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_,  
 (Day) (Month) (City) (State)

\_\_\_\_\_  
 (Applicant's Signature)

**Note: If submitting your order by mail, you must have your Sworn Statement notarized using the Certificate of Acknowledgment below. The Certificate of Acknowledgment must be completed by a Notary Public. (Law enforcement and local and state governmental agencies are exempt from the notary requirement.)**

**CERTIFICATE OF ACKNOWLEDGMENT**

State of \_\_\_\_\_)

County of \_\_\_\_\_)

On \_\_\_\_\_ before me, \_\_\_\_\_, personally appeared \_\_\_\_\_,  
 (here insert name and title of the officer)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.  
 (SEAL)

\_\_\_\_\_  
 SIGNATURE

## CALIFORNIA COUNTY RECORDERS

Alameda.....	1106 Madison Street, Room 214, Oakland, CA 94607, (510) 272-6363
Alpine.....	P.O. Box 217, Markleeville, CA 96120-0217, (530) 694-2286
Amador.....	810 Court Street, Jackson, CA 95642, (209) 223-6468
Butte.....	25 County Center Drive, Administration Building., Oroville, CA 95965, (530) 538-7691
Calaveras.....	Government Center, 891 Mountain Ranch Road, San Andreas, CA 95249, (209) 754-6372
Colusa.....	546 Jay Street, Colusa, CA 95932-2491, (530) 458-0500
Contra Costa.....	555 Escobar Street, Martinez, CA 94553, (925) 646-2365
Del Norte.....	981 H Street, Suite 160, Crescent City, CA 95531, (707) 464-7216 or 7205
El Dorado.....	360 Fair Lane, Placerville, CA 95667, (530) 621-5490
Fresno.....	2281 Tulare Street, Room 303, or P.O. Box 766, Fresno, CA 93712, (559) 488-3476
Glenn.....	526 West Sycamore Street, Courthouse, Willows, CA 96988, (530) 934-6412
Humboldt.....	825 5th Street, Fifth Floor, Eureka, CA 95501, (707) 445-7382
Imperial.....	940 Main Street, Room 206, El Centro, CA 92243-2865, (760) 482-4272
Inyo.....	Courthouse, 168 N. Edwards Street, Independence, CA 93526, (760) 878-0222
Kern.....	1655 Chester Avenue, Bakersfield, CA 93301, (661) 868-6400
Kings.....	Government Center, 1400 W. Lacey Blvd., Hanford, CA 93230, (559) 582-3211, X 2475
Lake.....	Courthouse, 255 North Forbes Street, Lakeport, CA 95453, (707) 263-2293
Lassen.....	Courthouse, 220 S. Lassen Street, Room 5, Susanville, CA 96130, (530) 251-8234
Los Angeles.....	12400 Imperial Highway, Room 1002, Norwalk, CA 90650, (562) 462-2137
Madera.....	200 West 4 <sup>th</sup> Street, Madera, CA 93637, (559) 675-7724
Marin.....	3501 Civic Center Drive, Courthouse, Room 234, San Rafael, CA 94903, (415) 499-6094
Mariposa.....	4982 10th Street, P.O. Box 35, Mariposa, CA 95338, (209) 966-2332
Mendocino.....	501 Low Gap Road, #1020, Ukiah, CA 95482, (707) 463-4376
Merced.....	2222 M Street, Merced, CA 95340, (209) 385-7627
Modoc.....	204 Court Street, Room 107, Alturas, CA 96101, (530) 233-6205
Mono.....	83 Main Street, P.O. Box 237, Bridgeport, CA 93517-0237, (760) 932-5530
Monterey.....	Church and Alisal Street, P.O. Box 29, Salinas, CA 93902-0029, (831) 755-5041
Napa.....	900 Coombs Street, Room 116, P.O. Box 298, Napa, CA 94559-2936, (707) 253-4105
Nevada.....	950 Maidu Avenue, Nevada City, CA 95959, (530) 265-1221
Orange.....	12 Civic Center Plaza, P.O. Box 238, Santa Ana, CA 92702-0238, (714) 834-2500
Placer.....	2954 Richardson Drive, Auburn, CA 95603, (530) 886-5600
Plumas.....	520 Main Street, Room 102, Quincy, CA 95971, (530) 283-6218
Riverside.....	2724 Gateway Drive, or P.O. Box 751, Riverside, CA 92502-0751, (951) 486-7000
Sacramento.....	600 8th Street, or P.O. Box 839, Sacramento, CA 95812-0839, (916) 874-6334
San Benito.....	440 5th Street, Room 206, Hollister, CA 95023-3896, (831) 636-4029
San Bernardino.....	222 W. Hospitality Lane, San Bernardino, CA 92415-0022, (909) 387-8314
San Diego.....	1600 Pacific Highway, Room 260, or P.O. Box 1750, San Diego, CA 92112-4147, (619) 237-0502
San Francisco.....	One Dr. Carlton B. Goodlett Place, City Hall Room 190, San Francisco, CA 94102-4698, (415) 554-4176*
San Francisco Health Dept.	101 Grove Street, Room 105, San Francisco, CA 94102, (415) 554-2700**, (415) 554-2710***
San Joaquin.....	6 South El Dorado, Second Floor, or P.O. Box 1968, Stockton, CA 95201-1968, (209) 468-3939
San Luis Obispo.....	1144 Monterey Street, Suite C, San Luis Obispo, CA 93408, (805) 781-5080
San Mateo.....	Vital Records, 1st Floor, 555 County Center Dr., Redwood City, CA 94063-1665, (650) 363-4713
Santa Barbara.....	1101 Anacampa Street, P.O. Box 159, Santa Barbara, CA 93102-0159, (805) 568-2250
Santa Clara.....	County Government Center, East Wing, 70 W. Hedding St., San Jose, CA 95110, (408) 299-4227
Santa Cruz.....	701 Ocean Street, Room 230, Santa Cruz, CA 95060, (831) 454-2800
Shasta.....	1450 Court Street, Suite 208, Redding, CA 96001, (530) 225-5678
Sierra.....	P.O. Drawer D., Downieville, CA 95936, (530) 289-3295
Siskiyou.....	311 4th Street, P.O. Box 8, Yreka, CA 96097, (530) 842-8065
Solano.....	675 Texas Street, Fairfield, CA 94533, (707) 421-6290
Sonoma.....	585 Fiscal Drive, Room 103F, or P.O. Box 1709, Santa Rosa, CA 95402, (707) 565-2651
Stanislaus.....	1021 I Street, Suite 101, or P.O. Box 1670, Modesto, CA 95353, (209) 525-5251
Sutter.....	433 Second Street, or P.O. Box 1555, Yuba City, 95992-1555, (530) 822-7134
Tehama.....	633 Washington Street, P.O. Box 250, Red Bluff, CA 96080, (530) 527-3350
Trinity.....	101 Court Street, P.O. Box 1215, Weaverville, CA 96093, (530) 623-1215
Tulare.....	County Civic Center, 221 S. Mooney Blvd., Room 105, Visalia, CA 93291-4593, (559) 733-6419
Tuolumne.....	2 South Green Street, Sonora, CA 95370, (209) 533-5531
Ventura.....	800 South Victoria Avenue, LN 1260, Ventura, CA 93009, (805) 654-2295
Yolo.....	625 Court Street, Room B01, Woodland, CA 95695, (530) 666-8130
Yuba.....	915 8th Street, Marysville, CA 95901, (530) 749-7851

\* Marriages

\*\* Births

\*\*\* Deaths