[TODAY'S DATE]
[YOUR FULL NAME HERE] [YOUR STREET ADDRESS] [CITY], TX [ZIPCODE]
Texas Vital Statistics Department of State Health Services PO Box 12040 Austin, TX 78711-2040
Dear Texas Vital Statistics,
My name is [YOUR FULL NAME]. I was born on [YOUR BIRTHDAY, INCLUDING YEAR] in [CITY WHERE YOU WERE BORN]. On [DATE YOU WERE ADOPTED], I was adopted by [ADOPTIVE PARENTS' FULL NAMES]. My mother's maiden name was [YOUR MOTHER'S MAIDEN NAME]. When I was adopted, a new birth certificate was created for me. It isted my adoptive parents' names rather than my birth parents' names. On [DATE ADOPTION LEGALLY ENDED], my adoption was ["REVOKED" OR "ANNULLED"].
am writing to you because I would like my birth certificate to have the names of my actual parents, rather than the names of my former adoptive parents with whom I no onger have a legal relationship. My birth parents' names were [BIRTH PARENTS' FULL NAMES AT THE TIME OF YOUR BIRTH]. My mother's maiden name was [YOUR MOTHER'S MAIDEN NAME]. Please issue me a birth certificate that reflects this original (pre-adoption) information.
Enclosed, please find a certified copy of Judge [JUDGE'S NAME]'s order ["REVOKING" OR "ANNULLING"] the adoption. Please also find a ["CHECK" OR "MONEY ORDER"] for S47. This includes the \$25 fee to file a new birth certificate for me and the \$22 fee to send me a certified copy.  Thank you,
Thunk you,
[YOUR FULL NAME HERE] Enclosures (2)
Texas Foster Youth Justice Project www.texasfosteryouth.org
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