

AFFIDAVIT OF BIRTH

STATE OF _____ COUNTY OF _____ BEFORE ME, the undersigned authority, personally appeared the undersigned Affiant, who, being first duly sworn, deposes and says under oath as follows:

1. AFFIANT INFORMATION

Full Legal Name of Affiant: _____
Date of Birth: _____
Current Address: _____
Phone Number: _____
Email Address: _____

2. CHILD INFORMATION

Full Name of Child: _____
Date of Birth: _____
Place of Birth (City, State, Hospital if applicable): _____

3. STATEMENT OF FACTS

The Affiant hereby affirms that the above-named child was born alive on the above stated date and place, and that the Affiant is the biological parent/legal guardian of the child. The Affiant has personal knowledge of the facts stated herein and declares them to be true and correct under penalty of perjury under the laws of the United States of America and the State of _____.

4. ADDITIONAL INFORMATION

The Affiant understands that this affidavit may be used for the purpose of obtaining a birth certificate or other legal documents, and certifies that this information is accurate to the best of their knowledge. Affiant acknowledges that knowingly providing false information in this affidavit may subject the Affiant to criminal penalties.

5. NOTARY ACKNOWLEDGMENT

STATE OF _____ COUNTY OF _____ Subscribed and sworn to before me this _____ day of _____, 20____ by _____, personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this affidavit.

Notary Public Signature _____

Printed Name of Notary Public _____

My Commission Expires: _____

6. AFFIANT SIGNATURE

Signature of Affiant: _____
Printed Name of Affiant: _____
Date: _____

7. WITNESS SIGNATURE

Signature of Witness: _____
Printed Name of Witness: _____

This affidavit is intended for use in connection with legal matters requiring proof of birth and parentage. It complies with applicable United States laws and should be completed truthfully and accurately.

AFFIANT SIGNATURE

WITNESS SIGNATURE

Signature: _____

Signature: _____

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