

VOLUNTARY PATERNITY AFFIDAVIT

PLEASE READ THE OTHER SIDE OF THIS FORM BEFORE COMPLETING THE FOLLOWING INFORMATION. ALL ITEMS MUST BE ANSWERED.

For State Vital Records Office Use Only	
Docket #	
Certificate #	
Facility Code	
Date Completed	

COPY

CHILD'S INFORMATION AS SHOWN ON BIRTH CERTIFICATE: Was child one of a multiple birth (twins, triplets...etc)? Yes No

CHILD

Child's Name First FIRST NAME	Middle, if any MIDDLE NAME	Last (surname) LAST NAME	Suffix (Jr., II, III, IV, V)
Sex <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male	Birth Date (Month, Day, Year) xx/xx/xxxx	City and County of Birth city county	Name of Hospital or Address of Home Birth Official Hospital Name

CHILD'S LAST NAME (surname) AFTER PATERNITY - Do not leave blank. You may keep it the same as on the birth certificate, change it to the father's, or add the father's last name to it.

NEW LAST NAME

FATHER

Father's Name First Father First	Middle, if any Father Middle	Last (surname) Father Last	Suffix (Jr., Sr., I, II, III, IV, V)
State or Foreign Country of Birth State	Birth Date (Month, Day, Year) xx/xx/xxxx	Social Security Number (Write "None" or Specify) xxx-xx-xxxx	
Hispanic Origin (Write "None" or Specify) Father Hispanic origin	Race Father Race	Education (Highest Grade Completed) Father education level	Daytime Phone (Include Area Code) (xxx) xxx-xxxx
Address (Street Address AND P.O. Box) street address PO Box xx		(City, Town or Location) any town	(State and Zip Code) State xxxxx

MOTHER

Mother's Name First mother first	Middle, if any mother middle	Last Name (surname) Before Any Marriage mother maiden name	Current Last Name (surname) mother current last
State or Foreign Country of Birth foreign country	Birth Date (Month, Day, Year) xx/xx/xxxx	Social Security Number (Write "None" or Specify) xxx-xx-xxxx	Daytime Phone (Include Area Code) xxx-xxx-xxxx
Address (Street Address AND P.O. Box) street address Unit #x		(City, Town or Location) any city	(State and Zip Code) State xxxxx

MOTHER: Check the one statement below that best describes the mother's marital status at the time of this child's conception, birth, or any time between.

- I was not legally married to anyone.
- I was legally married to someone other than the father of this child. As required by Iowa law, attached to this affidavit is a certified copy of the final court order signed by a judge and filed with the Clerk of District court that rules that the man to whom I was legally married is not the father of this child.
- I was not legally married. However, I have since legally married the father of this child. As required, a certified copy of our marriage record (which will be returned to me) is attached.
- I was legally married to the father of this child. As required, a certified copy of our marriage record (which will be returned to me) is attached.

AFFIRMATION: Each parent must sign and date this form in the presence of an authorized notary public. Notary completes and signs below.

FATHER: I affirm that I understand that signing this paternity affidavit is voluntary and that I understand my rights, responsibilities, alternatives, and consequences. I further acknowledge that I am the biological father of the above named child and do hereby give my permission to enter my name as the legal father on the birth certificate. I affirm that the above is true and accurate.

MOTHER: I affirm that I understand that signing this paternity affidavit is voluntary and that I understand my rights, responsibilities, alternatives, and consequences. I am the birth mother of the above named child and do hereby give my permission to enter the biological father's name as the legal father on the birth certificate. I affirm that the above is true and accurate.

Father's Signature xx/xx/xxxx
 Father's Signature _____ Date Signed _____
 State of notary state County of notary county ss

Mother's Signature xx-xx-xxxx
 Mother's Signature _____ Date Signed _____
 State of notary state County of notary county ss

Signed and affirmed in my presence **FATHER NAME**
Write name exactly as appears on father's photo I.D.

Signed and affirmed in my presence **MOTHER NAME**
Write name exactly as appears on mother's photo I.D.

notary signature xx-xx-xxxx
 Notary Public's Signature _____ Date Signed _____

notary signature xx-xx-xxxx
 Notary Public's Signature _____ Date Signed _____

Notary Address & Expiration

 address
 town, state zip

Notary Address & Expiration

 address
 town, state zip code

SEAL

SEAL