

STATE OF: _____

COUNTY OF: _____

AFFIDAVIT OF ONE AND THE SAME PERSON
IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS
REQUEST TO PROCESS COURT DETERMINATION OF PATERNITY

Comes now the undersigned, being first duly sworn, states and deposes:

1. My relationship to the registrant (child) is: (CHECK ONE)

SELF _____ MOTHER _____ FATHER _____

LEGAL GUARDIAN _____ (Provide proof of legal guardianship)

2. The registrant's name on the birth certificate is _____
(first)

_____ (middle) _____ (last)

3. The registrant was born _____ in _____, Idaho
(child's date of birth) (city of birth)

to _____
(mother's full maiden name)

and _____
(father's full name)

born _____ in _____
(father's date of birth) (father's state or country of birth)

4. The registrant is the same _____
(child's name)

referred to in the attached court order from a court of competent jurisdiction that issued a court determination of paternity.

5. That the applicant desires the birth certificate to be amended to reflect the determination of paternity issued by the court.

Applicant's Signature: _____

Printed Name: _____

Street Address or P.O. Box: _____

City, State and Zip Code: _____

Subscribed and sworn to before me this _____ day of _____, _____
(Day) (Month) (Year)

(SEAL)

Notary Public: _____

Residing In: _____

Commission Expires: _____