

Person Filing: _____
 Address (if not protected): _____
 City, State, Zip Code: _____
 Telephone: _____
 Email Address: _____
 ATLAS Number: _____
 Lawyer's Bar Number: _____

FOR CLERK'S USE ONLY

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

(2) _____
Person Filing (Petitioner)

(3) Case No. _____

(4) ATLAS No. _____
(if applicable)

Parent (Respondent)

VOLUNTARY ACKNOWLEDGMENT OF PATERNITY A.R.S. § 25-812

(5) **The Clerk is requested to issue an Order establishing paternity for the following:**
(List names as they appear on birth certificates, if any.)

	NAME(S):	First	Middle	(new) Last
(a)				
(b)				
(c)				

who were born on this date and at this location (below): (List in same order as above.)

	Month / Day / Year	City, State, Nation of Birth
(a)		
(b)		
(c)		

(6) Mother's Full Name _____

Maiden Name _____ Date of Birth _____

The natural mother of the minor children was not married at the time of birth or at any time during the ten months prior to birth. The natural father is:

(7) Father's Full Name _____

Date of Birth _____

Birthplace (City, State, Country) _____

Current Address _____

The parents request the Court to Order the Office of Vital Records to amend the birth certificate(s) to correct the name of the father.

(8) We base this request on: (Mark **only** one)

Affidavit of Acknowledgment, by which we agree and acknowledge the natural father named above.

OR

Genetic (DNA) Testing and Laboratory Affidavit: Attached is an affidavit from a certified laboratory indicating that the father named above has not been excluded as the natural father of the children and we agree to be bound by the results of the genetic test.

(9) The parents request the Court to Order the Office of Vital Records to amend the birth certificate(s) to change the minor child(ren)'s name(s) TO: (List in same order as **(5)**).
(Optional)(New Names)

	First	Middle	Last
(a)			
(b)			
(c)			

IMPORTANT NOTICE: READ THIS BEFORE YOU SIGN:

Arizona law requires that before voluntarily acknowledging paternity, you be given notice of the alternatives to, legal consequences of and the rights and responsibilities that result. You should know:

- No one is required to voluntarily acknowledge paternity.
- You have the right to seek legal advice before signing this document, and
- If you are unsure who the father is, an alternative is to have genetic (DNA) testing done.

After you submit this **Voluntary Acknowledgement of Paternity**, the Clerk of Court or authorized personnel will issue an Order legally establishing the natural father. This Order is the same as a judgment of the Superior Court. After the Order is issued both parents will have all the rights and responsibilities of parents required by Arizona law. The Order does not decide issues about child support, parenting time or authority for legal decision making. However the Order includes a statement of Arizona law that the parent with whom the minor child has resided for the greater part of the last six months shall have authority for legal decision making unless otherwise ordered by the Court.

Arizona law allows either parent to rescind the acknowledgment of paternity if certain requirements are met. See § 25-812(H) of the Arizona Revised Statutes for the requirements.

**This document can be notarized OR witnessed.
Witness must be at least 18 years of age and not related to either parent by blood or marriage.
Sign only in presence of Deputy Clerk of Court, Notary, or Witness.**

(10) Signature of Mother

Date

(10) Signature of Actual Father

Date

Printed Name of Mother

Printed Name of Actual Father

(IF NOT NOTARIZED OR VERIFIED BY DEPUTY CLERK OF COURT, WITNESSED BELOW)

VOLUNTARY ACKNOWLEDGMENT OF PATERNITY

(Not required if notarized or verified by a Clerk of the Superior Court on preceding page.)

Signature of Witness

Signature of Witness

Printed name of Witness

Printed name of Witness

Address of Witness

Address of Witness

City, State, Zip Code

City, State, Zip Code

STATE OF _____

STATE OF _____

COUNTY OF _____

COUNTY OF _____

This instrument was acknowledged before me this:

This instrument was acknowledged before me this:

_____ (date)

_____ (date)

by _____.

by _____.

Deputy Clerk or Notary Public

Deputy Clerk or Notary Public

(notary seal)

(notary seal)