# GEORGIA DEPARTMENT OF PUBLIC HEALTH

## REQUEST FOR SEARCH OF PATERNITY ACKNOWLEDGMENT • (REVISED 07/06/2020)

#### PLEASE READ BEFORE COMPLETING THIS FORM

The fee for searches of vital records has been established in accordance with GA Code Ann., 31-10-27. The \$10.00 fee includes a certified copy, if the record is found on file. Each additional copy purchased at the time of sale is \$10.00. The search fee is non-refundable.

#### **ELIGIBILITY**

After a document is filed, the following persons can request a certified copy from the State Office:

- 1. The person(s) who signed the original paternity acknowledgment
- 2. The guardian or temporary representative of any person who signed it. (must provide guardianship or custody documentation)
- 3. The child, if he or she is at least 18 years of age
- 4. The guardian, temporary guardian, or legal custodian of the child
- 5. The adult child's legal spouse, next of kin, legal representative, or someone who has applied in good faith to become the child's legal representative
- 6. A government agency who needs it for official purposes
- 7. In response to a court order or subpoena
- An attorney licensed in Georgia, who needs it for purposes of legal investigation on behalf of a client
- 9. A licensed child placement agency that needs it for official purposes

#### **HOW TO SUBMIT YOUR REQUEST**

Georgia law and the Department of Public Health regulations require that all requests for vital records include the signature and picture ID of the requestor and the proper fee.

A person requesting a search for paternity acknowledgement need only to provide:

- 1. A completed and signed Search of Paternity Acknowledgment form.
- 2. Provide the applicable fee(s) noted above.
- 3. A photocopy of your valid photo ID such as one of the following:
  - Georgia Driver's license unexpired or expired for not more than one year
  - State of Georgia Identification Card unexpired or expired for not more than one year
  - State of Georgia Weapons Carry License with photo
  - Unexpired driver's license issued by another U.S. State, jurisdiction or territory
  - Unexpired official Identification Card issued by another U.S. State, jurisdiction or territory
  - Unexpired U.S. Passport
  - Unexpired Foreign Passport
  - U.S. Military Identification, Military Dependent Identification, Veteran's Identification
  - Unexpired Consulate Card
  - Unexpired Transportation Worker Identification Credential (TWIC)
  - Current School, University, or College Identification Card (unexpired with ID number and signature)
  - Department of Driver Services (DDS) Identification Card
  - Department of Corrections Identification Card

**Please note:** If this request is being mailed, please send this completed form with a U.S. Money Order or certified check for the correct amount made payable to the State Office of Vital Records. Please do not send cash in the mail.

Page 1 of 2



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#### PLEASE PRINT OR TYPE ALL INFORMATION LEGIBLY AND CORRECTLY BELOW.

Enter total number of copies requested here:	Total Amount Due:
Section 1: Registrant's Information	
Legal Name of Party (First, Middle, & Last):	
Last Name at Birth:	
Sex: DOB (Month, Day, & Year):	
Place of Birth:	Age:
Race/Ethnicity:	
Section 2: Parent's Information	
Legal Name of Mother/Parent 1 (First, Middle, & Last): _	
Last Name at Birth:	
Legal Name of Father/Parent 2 (First, Middle, & Last): _	
Last Name at Birth:	
Section 3: Requestor's Information	
Name of Requestor (First, Middle, & Last):	
Phone Number:	
Email Address:	
Relationship (If other than self):	
Signature of Requestor:	
Section 3: Mailing Address of Requestor	
Please indicate the best mailing address to receive certi-	ficates.
Mailing Address:	<del> </del>
City, State, & Zip Code:	

Pursuant to O.C.G.A. GA Code Ann., 31-10; Section 31: Any person who willfully or knowingly supplies false information on this form to be used for any purpose of deception with intent to defraud; willfully uses or attempts to use any certificate of birth or copy of any record of birth knowing that such certificate was issued upon a record which was false or which relates to the birth of another person may be fined not more than \$1,000 or imprisoned for not more than five (5) years, or both upon conviction.