

Affidavit in Support of Establishing Paternity Father

A Separate Affidavit is Required for Each Child Needing Paternity Established

Section 1

I, _____, on oath, under penalty of perjury depose and allege
Name (First, Middle, Last)
upon information and belief that:

1. I am possibly the father of the child named below:

Child's Full Legal Name <small>(First, Middle, Last)</small>	Child's Date of Birth <small>(Month, Day, Year)</small>	Place of Birth <small>(City, Parish, State)</small>

2. The child was possibly conceived as a result of sexual intercourse between
_____ and me during the time stated below:
Mother (First Middle, Last)

Relationship dates (Month, Day, Year) From: _____ To: _____
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3. _____ is the father of this child.
Father's Name

The following facts support my allegations of paternity:

a. We lived together Yes No Don't know
If yes, complete the dates and address

Dates From: _____ / _____ / _____ To: _____ / _____ / _____
Address: _____
City: _____ State _____

- b. The mother told me that I am the father of this child. Yes No Don't know
- c. I am named as the father on the birth certificate. Yes No Don't know
 Copies attached
- d. I signed an acknowledgment of paternity before an acknowledgment became a legal finding of paternity. Yes No Don't know
- e. I admitted being the father of the child Yes No Don't know
- f. I sent cards/letters regarding the pregnancy and/or about the child. Yes No Don't know
 Copies attached
- g. I was present at the birth of the child. Yes No Don't know
- h. I visited the child at the hospital following the birth. Yes No Don't know
- i. I offered to pay abortion expenses. Yes No Don't know
- j. I offered to pay medical expenses. Yes No Don't know
- k. I paid for birth related expenses. Yes No Don't know

- l. I claimed the child on tax returns. Yes No Don't know
- m. I have provided food, clothing, gifts or financial support for the child. Yes No Don't know
- n. I lived with the child. Yes No Don't know
If yes, explain in Section 2
- o. I visited the child. Yes No Don't know
If yes, explain in Section 2
- p. The child resembles me. Yes No Don't know
 Photo(s) attached
If yes, explain in Section 2
- q. There are other witnesses to my relationship with the mother. Yes No Don't know
If Yes, list names and addresses and briefly describe relevant facts known about each.

Name F: _____	M: _____	L: _____	Suf: _____
Address: _____			
City: _____	ST: _____	Zip: _____	Phone: () _____
Comments: _____			

Name F: _____	M: _____	L: _____	Suf: _____
Address: _____			
City: _____	ST: _____	Zip: _____	Phone: () _____
Comments: _____			

Section 2 **ADDITIONAL COMMENTS**

I swear that I have read this questionnaire or that it has been read to me, and certify that my answer to each question is true and correct. I understand that if I have given false information or answer to any material question herein, I may be subject to criminal prosecution for knowingly giving false information or answer. I further understand the information I have provided may affect the priority assigned to my case and any change in priority will only result from additional information received by the Child Support/District Attorney's Office. I agree to submit myself to genetic testing as may be necessary to establish paternity.

Father - Print First, Middle, Last Name

Signature

Date

Legal Guardian (If Father is a minor)

Signature

Date

Sworn to and signed before me this _____ day of _____, _____
at _____, Louisiana.

Typed or Printed Name and Title/Notary ID. No.

Signature