AFFIDAVIT OF PATERNITY BY FATHER OF CHILD

l,	, hereby affirm the f	following:		
1.	That I am the biological fa			
	to, on	at	,,	;
2.	2. That the facts of the birth of my child were registered at,,			
	······································	<u> </u>		
3.	At the time of the birth of	, I w	as not married to	.
IN WIT	NESS WHEREOF, I have s	set my hand this	at	,
	·			
		-		
Signatı	ure of Father			
	NO	OTARY ACKNO	WLEDGEMENT	
State c	ıf			
County	of			
The foregoing instrument was acknowledged before me this, by the undersigned,, who is personally known to me or satisfactorily proven to me to be the person				
	name is subscribed to the			o be the person
Signati	ure of Notary Public	-		
3	,			
Print N	ame	-		
My Coi	nmission Expires:		Seal	