

IN THE PROBATE COURT OF MOBILE COUNTY, ALABAMA

STATE OF ALABAMA

:

COUNTY OF MOBILE

:

CASE NO.

DECLARATION OF LEGITIMATION

I, _____,
a _____ male, born on _____ and a resident of Mobile County, Alabama; my address
being _____ do hereby declare that I am
the father of the following named child, _____,
a _____ child born on _____ in Mobile County, Alabama, whose mother
is _____. Said child has been in the custody of
_____ since _____.

I hereby file this Declaration of Legitimation for the purpose of recognizing said child as my
own, capable of inheriting my estate, real and personal, as if born in wedlock. I further declare that
I want said child, presently known as _____
to bear and be known as _____.

IN WITNESS WHEREOF, I, hereunto subscribed my name on this the _____ day of
_____, 20_____.

WITNESSES:

[NAME]

[ADDRESS]

[NAME]

[ADDRESS]

IN THE PROBATE COURT OF MOBILE COUNTY, ALABAMA

STATE OF ALABAMA

:

COUNTY OF MOBILE

:

AFFIDAVIT

I, _____, am a _____ female, above the age of
nineteen years and I presently reside at _____.

I am the mother of the following named child, _____,
a minor, born on _____ in Mobile County, Alabama. The father
of my said child is _____.

I do hereby consent to the legitimation of the above named child and change of _____ name
from _____ to _____.

[Affiant's Signature]

STATE OF ALABAMA

COUNTY OF MOBILE

On this _____ day of _____, 20____, before me _____,
a Notary Public in and for said State, personally appeared _____,
known to me to be the person who executed the within affidavit and acknowledged to me that
_____ executed the same for the purposes therein stated.

NOTARY PUBLIC, Mobile County, Alabama
My Commission Expires:

CONSENT OF MOTHER

IN THE MATTER OF:

IN THE PROBATE COURT OF

_____ COUNTY, ALABAMA

TO LEGITIMATE: _____

AND CHANGE NAME TO:

CASE NO: _____

Comes Now, _____ and shows unto the Court as follows:

That she is a resident, citizen of _____ County, Alabama and of
legal age and is the mother of _____ born at
_____ County, Alabama on _____.

I hereby consent to the Legitimation of my child _____
by _____ and consent that said child's name be
changed to _____ and waive any other or further notice
thereof.

This the _____ day of _____, 20__.

Subscribed and sworn to before me this

____ day of _____, 20__.

Notary Public

**ALABAMA CENTER FOR HEALTH STATISTICS
PROBATE LEGITIMATION INFORMATION SHEET &
REQUEST FOR CERTIFIED COPY OF BIRTH CERTIFICATE**

Send this form with court order to:
Center For Health Statistics, P.O. Box 5625, Montgomery, AL 36103-5625

I. Child's Information

Full name **at birth**: _____
(*Capitalize last name*)

Full name **after legitimation**: _____
(*Capitalize last name*)

Date of birth: _____ County of birth: _____

II. Mother's Information

Full maiden name: _____

Current legal name: _____

Date of birth: _____

Mailing Address: _____

Telephone number: (_____) _____

III. Father's Information

Full name: _____

Date of birth: _____ State of birth: _____

Mailing Address: _____

Telephone number: (_____) _____

IV. Applicant Section (To obtain a certified copy of the new birth certificate.)

The fee is \$25.00, which includes one copy of the certificate. This fee must be paid before a new certificate is issued. Additional copies of the same record ordered at the same time are \$6.00 each. Payment must be made by check or money order payable to the **State Board of Health**. # Copies: _____ Amt. Paid: \$ _____

Signature of mother or father: _____

Send birth certificate to (check one): Mother (☐) Father (☐) at address above.

ALABAMA DEPARTMENT OF HUMAN RESOURCES
PUTATIVE FATHER INTENT TO CLAIM PATERNITY REGISTRATION

Information about the Father:

NAME

Last _____ First _____ Middle _____

RACE _____ DOB _____ SSN _____

Address _____

Information about the Child:

NAME

Last _____ First _____ Middle _____

DOB _____ Place of Birth _____

Information about the Mother:

NAME

Last _____ First _____ Middle _____

Other names mother may have used _____

RACE _____ DOB _____ SSN _____

Address _____

Possible Date(S) of Sexual Intercourse: _____

1. I understand that I must notify the registry of any change of address in writing with notarization using DHR-ACFD-1936, Putative Father Registry-Change of Address.
2. I understand that I may revoke this notice of intent to claim paternity at any time through a written statement to the Putative Father Registry. This statement should be notarized. If it is not, I understand that I may be required to provide verification before action is taken on my request.
3. I understand that this is not a substitute for legal action such as paternity adjudication, legitimation or securing court-ordered custody or visitation rights.
4. I have attached a Child Support Obligation Income Statement/Affidavit as required for registration.

I certify that the information provided above is true and correct to the best of my knowledge. I understand that a person who knowingly or intentionally registers false information commits a Class A Misdemeanor. I further understand that my social security number will be used for identification purposes as required by Alabama law or as otherwise ordered by a court of law.

Signature of Putative Father

Date

STATE OF _____ County of _____
Before me, A Notary Public in and for said County and State,
personally appeared _____, who have been duly
sworn upon his oath, the foregoing representatives are true this
_____ day of _____, 20____.

Notary/Date Commission Expires

Mail To:

PUTATIVE FATHER REGISTRY
OFFICE OF ADOPTION
ALABAMA DEPARTMENT OF HUMAN RESOURCES
50 RIPLEY STREET
MONTGOMERY, ALABAMA 36130

CHILD SUPPORT OBLIGATION
INCOME STATEMENT/AFFIDAVIT

State of Alabama
Unified Judicial System
CS-41 Rev. 10/93

Case Number _____

IN THE _____ COURT OF _____ COUNTY

Plaintiff _____ v. Defendant _____

AFFIDAVIT

I, _____, being duly sworn upon my oath,
state as follows:

1. I am the () plaintiff () defendant in the above
entitled matter.
My social security number is: _____.
2. I am () currently employed. My employer's name and
address is:

- 2a. I am () not currently employed.

Last position title: _____

Average monthly salary last year of employment: \$ _____

3. My gross monthly income includes: (For examples of income
that must be included, see page 3. If income varies by
month, enter the estimated average monthly income.)

Employment income	\$	_____
Self-employment income	\$	_____
Other employment-related income	\$	_____
Other non-employment related income	\$	_____
Total	\$	_____

- 3a. I incur the following amount monthly
For child-care. \$ _____

(If none, write "None")

CHILD SUPPORT OBLIGATION
INCOME STATEMENT/AFFIDAVIT
(Continued)

State of Alabama
Unified Judicial System
CS-41 Rev. 10/93

Case Number _____

3b. The child (ren) of this party is/are
() not covered by health insurance
From me and/or my employer.

() covered by health insurance
and I pay the following amount
monthly for the insurance coverage.

\$ _____
(If none, write "None")

4. I understand that I will be required to maintain all income documentation used in preparing this affidavit (including my most recent income tax return) and that such documentation shall be made available as directed by the court.
5. I understand that any intentional falsification of the information presented in this income statement/affidavit shall be deemed contempt of court.

Affiant

Sworn to and subscribed before me this _____
day of _____, 20_____.

Signature

Notaries/Clerk/Register

CHILD SUPPORT OBLIGATION
INCOME STATEMENT/AFFIDAVIT
(Continued)

State of Alabama
Unified Judicial System
CS-41 Rev. 10/93

Case Number _____

EXAMPLES OF INCOME THAT MUST BE INCLUDED IN YOUR GROSS MONTHLY INCOME:

1. *Employment Income* - shall include, but not be limited to salary, wages, bonuses, commissions, severance pay, workers' compensation, pension income, unemployment insurance, disability insurance, and Social Security benefits.
2. *Self-Employment Income* - shall include, but not be limited to, income from self-employment, rent, royalties, proprietorship of a business and joint ownership of a partnership or closely held corporation. "Gross income" means gross receipts minus ordinary and necessary expenses required to produce such income.
3. *Other Employment-Related Income* - shall include, but not be limited to, the average monthly value of any expense reimbursements or in-kind payments received in the course of employment that are significant and reduce personal living expenses, such as furnished automobile, a clothing allowance, and a housing allowance.
4. *Other Non-Employment Related Income* - shall include, but not be limited to, dividends, interest, annuities, capital gains, gifts, prizes, and pre-existing periodic alimony.

RULE 32, ALABAMA RULES OF JUDICIAL ADMINISTRATION, PROVIDES THE FOLLOWING DEFINITIONS:

Income. For the purposes of the guideline specified in this Rule, "income" means the actual gross income of a parent, if the parent is employed to full capacity, or if the parent is unemployed or underemployed, then it means the actual gross income the parent has the ability to earn.

Gross Income "Gross income" includes income from any source, and includes, but is not limited to, income from salaries, wages, commissions, bonuses, dividends, severance pay, pensions, interest, trust income, annuities, capital gains, Social Security benefits, workers' compensation benefits, unemployment insurance benefits, disability insurance benefits, gifts, prizes, and preexisting periodic alimony.

"Gross income" does not include child support received for other children or benefits received from means-tested public assistance programs, including but not limited to, Aid to Families with Dependent Children, Supplemental Security Income, food stamps, and general assistance.

CHILD SUPPORT OBLIGATION
INCOME STATEMENT/AFFIDAVIT
(Continued)

State of Alabama
Unified Judicial System
CS-41 Rev. 10/93

Case Number

*Self-
Employment
Income*

For income from self-employment, rent, royalties, proprietorship of business, or joint ownership of a partnership or closely held corporation, "gross income" means gross receipts minus ordinary and necessary expenses required to produce such income, as allowed by the Internal Revenue Service, with the exceptions noted in Rule 32 (B) (3) (b).

Under those exceptions, "ordinary and necessary expenses" does not include amounts allowable by the Internal Revenue Service for the accelerated component of depreciation expenses, investment tax credits, or any other business expenses determined by the court to be inappropriate for determining gross income for purposes of calculating child support.

*Other
Income*

Expense reimbursements or in-kind payments received by a parent in the course of employment or self-employment or operation of a business shall be counted as income if they are significant and reduce personal living expenses.

ALABAMA DEPARTMENT OF HUMAN RESOURCES
PUTATIVE FATHER REGISTRY CHANGE OF ADDRESS

NAME OF PUTATIVE FATHER AS PREVIOUSLY REGISTERED:

Last _____ First _____ Middle _____

Race _____ DOB _____ SSN _____

Previous Address _____

Current Address _____

NAME OF MOTHER AS PREVIOUSLY REGISTERED:

Last _____ First _____ Middle _____

Race _____ DOB _____ SSN _____

NAME OF CHILD AS PREVIOUSLY REGISTERED:

Last _____ First _____ Middle _____

DOB _____ Place of Birth _____

Signature of Putative Father

Date

Sworn to and subscribed to me this day, _____

Notary/Date Commission Expires

Mail to: Putative Father Registry
Office of Adoption
Alabama Department of Human Resources
50 Ripley Street
Montgomery, AL 36130

DHR-ACFD-1936