

(1) Name of Person Filing: _____
 Mailing Address: _____
 City, State, Zip Code: _____
 Daytime Phone Number: _____
 Evening Phone Number: _____
 (2) ATLAS Number (if applicable): _____
 Attorney Bar Number (if applicable): _____
 Representing: Self (No Attorney) OR Attorney

**SUPERIOR COURT OF ARIZONA
 MOHAVE COUNTY**

(3) _____
 Person filing (Petitioner)

(4) Case Number: _____

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

 Other Parent (Respondent)

(5) The Clerk is requested to issue an order establishing paternity for the following minor children:

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.
- 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.

