

APPENDIX I

ACKNOWLEDGMENT OF PATERNITY FOR LEGITIMATION

State of \_\_\_\_\_ )
County of \_\_\_\_\_ ) ss:

I, \_\_\_\_\_ acknowledge that I am the father
of \_\_\_\_\_
(father's name)
born on \_\_\_\_\_ at \_\_\_\_\_. At the time of this birth
(child's name) (date)

I was \_\_\_\_\_ years old. I was born at \_\_\_\_\_. Race or color \_\_\_\_\_.
Occupation \_\_\_\_\_. I am now married to \_\_\_\_\_, mother
(mother's maiden name)
of \_\_\_\_\_. I request that the record of birth now on file be
(child's name)
changed accordingly. The child's name shall be \_\_\_\_\_.

FATHER

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_,
20\_\_\_\_\_.

(NOTARY SEAL)

Printed Signature
Notary Public for the State of Montana
Residing at: \_\_\_\_\_
My Commission expires:

State of \_\_\_\_\_ )
County of \_\_\_\_\_ ) ss.

I, \_\_\_\_\_ acknowledge that I am the mother of \_\_\_\_\_ born on
(mother's maiden name)
\_\_\_\_\_ at \_\_\_\_\_. The father is \_\_\_\_\_. I am
(date)
now married to \_\_\_\_\_. I request that the record of birth now on file be
changed
accordingly.

MOTHER

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_,
20\_\_\_\_\_.

(NOTARY SEAL)

Notary Public for the State of Montana
Printed Signature
Residing at: \_\_\_\_\_
My Commission expires:

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