

AFFIDAVIT

STATE OF UTAH )

: ss.

COUNTY OF \_\_\_\_\_ )

\_\_\_\_\_, being first duly sworn, upon oath deposes and says:

Name of Relative or Guardian

I am a resident of \_\_\_\_\_, State of Utah.

County of Relative or Guardian

I am a relative / legal guardian (circle one) of the following child born to \_\_\_\_\_ outside of marriage:

Name of Mother

\_\_\_\_\_, \_\_\_\_\_

Name of Child

Date of Birth

Upon information and belief, \_\_\_\_\_ is the father of \_\_\_\_\_.

Name of Father

Name of Child

My belief is based on the following (choose the appropriate option(s)):

The mother acknowledged to me that she had sexual intercourse with \_\_\_\_\_ during the conception period of this child.

Name of Alleged Father

\_\_\_\_\_ was named to me as the father of this child by the mother.

Name of Alleged Father

\_\_\_\_\_ told me that he is the father of this child.

Name of Alleged Father

\_\_\_\_\_ acknowledged to me that he had sexual intercourse with the above-named mother during the conception period of this child.

Name of Alleged Father

\_\_\_\_\_ provided financial support for the child in the amount of

Name of Alleged Father

\$ \_\_\_\_\_, for the period from \_\_\_\_\_ to \_\_\_\_\_.

Amount

from date

to date

\_\_\_\_\_ has acted as the father in the following way(s):

Name of Alleged Father

He has openly held himself out to be the father.

He has filed a judicial action to establish parent-time with this child.

\_\_\_\_\_ was in a relationship with the mother at the approximate time of conception, and I was a witness to this relationship.

Name of Alleged Father

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have an open case with the Office of Recovery Services/Child Support Services (ORS/CSS) and I understand that ORS/CSS intends to establish paternity under the provisions of Utah Code Annotated 78B-15, and that I will cooperate with ORS/CSS in whatever actions are necessary to establish paternity of this child. I understand that a child support obligation may be established for both parents to pay for the support of this child.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Affiant

State of Utah

§

County of \_\_\_\_\_

Subscribed and sworn to before me \_\_\_\_\_, on this \_\_\_\_\_  
Notary Name

day of \_\_\_\_\_, in the year \_\_\_\_\_, by \_\_\_\_\_.  
Document Signer

Notary Seal:

\_\_\_\_\_  
Notary Signature