VS-8 (Rev 7-98)

COMMONWEALTH OF KENTUCKY
State Registrar of Vital Statistics

DECLARATION OF PATERNITY

FATHER'S AFFIDAVIT

Pursuant to KRS 213.046, I, _____, having been duly sworn do hereby
(Full Name of Father)
state, affirm, and acknowledge that I am the natural father of a _____ child, named
(Sex)
_____ born on _____
(Full Name of Child at Birth) *(Month) (Day) (Year)*
at _____, Kentucky.
(Hospital) *(City)* *(County)*
My date of birth is _____. I was born in _____.
(Month) (Day) (Year) *(City) (State)*
My highest grade of education completed was _____. My race is _____. I am of Hispanic Origin _____.
(Yes/No)
(If yes, specify) _____. My Social Security Number is _____.
(Cuban, Mexican, etc.)
My current address is _____.
(Street & Number, Apt. Number, City, State, Zip Code)

I HAVE READ AND UNDERSTAND MY RIGHTS AND RESPONSIBILITIES LISTED ON THE REVERSE SIDE.

_____
(Father's Signature)

Subscribed and sworn to before me on this the _____ day of _____

_____ _____
My Commission Expires *Notary*

MOTHER'S AFFIDAVIT

I, _____, having been duly sworn do hereby state, affirm, and
(Full Name of Mother)
acknowledge that I am the natural mother of the above said child and that _____,
(Father's Name)
the above affiant, is the natural father of said child. My maiden name is _____.
My date of birth is _____. My Social Security Number is _____.
(Month) (Day) (Year)
My current address is _____.
(Street & Number, Apt. Number, City, State, Zip Code)
CHILD'S NAME SHOULD READ _____

I HAVE READ AND UNDERSTAND MY RIGHTS AND RESPONSIBILITIES LISTED ON THE REVERSE SIDE.

_____
(Mother's Signature)

Subscribed and sworn to before me on this the _____ day of _____

_____ _____
My Commission Expires *Notary*

SAMPLE