

**Must be typewritten - Do not fold  
All facts must be given as of Time of Birth**

**REGISTRATION OF BIRTH  
Application for Registration of Birth**

OHIO Case No. \_\_\_\_\_ Doc. \_\_\_\_\_ Page \_\_\_\_\_

In the Court of Common Pleas, Probate Division of \_\_\_\_\_ County, on the \_\_\_\_\_ day of \_\_\_\_\_  
\_\_\_\_\_, 20\_\_\_\_. appeared \_\_\_\_\_ (Name of Registrant) \_\_\_\_\_ praying that the facts  
of birth be established in accordance with Section 3705.20 of the Revised Code, as follows:

CHILD	Full Name (at time of birth)		Social Security No.			
	Exact Place of Birth		Date of Birth	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
FATHER	Name of Father		MOTHER	Maiden Name of Mother		
	Age of Father (at the time of this birth)			Age of Mother (at the time of this birth)		
	Birthplace of Father			Birthplace of Mother		
The following evidence is presented to the Court to support the above facts of the place and date of birth and the parentage of the registrant to wit:						
DOCUMENT OR NAME OF WITNESS		DATE OF RECORD	PLACE OF BIRTH	DATE OF BIRTH	FATHER'S NAME	MOTHER'S NAME

The undersigned being first duly sworn, says that the facts stated in the foregoing Application are true as he/she verily believes and prays that the Court order the registration of said birth.

\_\_\_\_\_  
Registrant or Applicant Phone

\_\_\_\_\_  
Address

Sworn to before me and signed in my presence by the applicant or registrant aforesaid this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(SEAL)

\_\_\_\_\_  
Official Character

**JOURNAL ENTRY**

The Court on consideration of the aforesaid evidence submitted finds and orders that notice of hearing be dispensed with and the birth of applicant be registered in accordance with the facts hereinabove set forth; and that a summary of the finding and order of the Court, duly certified, be forthwith transmitted to the Director of Health, at Columbus, Ohio, as provided by law.

\_\_\_\_\_  
Judge

I hereby certify the above is a true copy of the application and entry in the foregoing matter.

\_\_\_\_\_  
Judge

\_\_\_\_\_  
Deputy Clerk

**Supporting Affidavits**

**IN THE MATTER OF THE REGISTRATION OF BIRTH**

**STATE OF OHIO, \_\_\_\_\_ Affidavit of Physician**

The undersigned, being first duly sworn, deposes and says that he was the physician in attendance at the birth of \_\_\_\_\_, the applicant herein that he has read the application and that the facts stated herein are true as he verily believes.

(Name of applicant at birth)

\_\_\_\_\_  
Attending physician

\_\_\_\_\_  
Address

Sworn to before me and signed in my presence by the said \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Official Title

**NOTE: If the affidavit of the attending physician cannot be secured, the application must be supported by the following affidavits of two persons, relative to non-relative, having personal knowledge of the facts.**

**STATE OF OHIO, \_\_\_\_\_ Affidavit**

The undersigned, being first duly sworn, deposes and says that \_\_\_he is \_\_\_\_\_ years of age, that \_\_\_he has read the application and that \_\_\_he has personal knowledge of the facts stated therein by reason of being \_\_\_\_\_

(State relationship, if any, or state facts showing personal knowledge)

and that the statements made in the application are true as \_\_\_he verily believes.

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

\_\_\_\_\_  
Address

Sworn to before me and signed in my presence by the said \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Official Title

**STATE OF OHIO, \_\_\_\_\_ Affidavit**

The undersigned, being first duly sworn, deposes and says that \_\_\_he is \_\_\_\_\_ years of age, that \_\_\_he has read the application and that \_\_\_he has personal knowledge of the facts stated therein by reason of being \_\_\_\_\_

(State relationship, if any, or state facts showing personal knowledge)

and that the statements made in the application are true as \_\_\_he verily believes.

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

\_\_\_\_\_  
Address

Sworn to before me and signed in my presence by the said \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Official Title