

Birth Affidavit Form PDF

Affiant's Full Name: _____

Relationship to the Person: _____

Contact Information (Phone, Email): _____

1. Details of the Person's Birth

- Full Name of Person: _____
- Date of Birth: _____
- Place of Birth (City, State, Country): _____
- Gender: Male Female Other

2. Declaration of Facts

"I, [Affiant's Name], hereby declare under penalty of perjury that the following information is true to the best of my knowledge."

- Description of circumstances surrounding the birth:

- Why no birth certificate is available (if applicable):

3. Additional Documentation Attached (if any)

Document Type	Description

Signature of Affiant: _____ Date: _____

Notary Public Signature: _____ Seal: _____