



FLORIDA PUTATIVE FATHER REGISTRY APPLICATION FOR SEARCH

CAREFULLY READ the information provided on the reverse of this form. PLEASE PRINT CLEARLY

Part 1 PUTATIVE FATHER'S (REGISTRANT) INFORMATION (If date of birth unknown, provide approximate age of father)

FULL NAME OF REGISTRANT	FIRST	MIDDLE	LAST INCLUDING ANY SUFFIX	DATE OF BIRTH
ADDRESS OF REGISTRANT	STREET	CITY	STATE	ZIPCODE
PHYSICAL DESCRIPTION OF FATHER				

Part 2 CONCEPTION INFORMATION

DATE OF CONCEPTION (MONTH, DAY, YEAR)	PLACE AND LOCATION OF CONCEPTION (Not limited to, but should include city and state)
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Part 3 MOTHER'S INFORMATION (If date of birth unknown, provide approximate age of mother)

FULL MAIDEN NAME OF MOTHER	FIRST	MIDDLE	SURNAME	
LEGAL SURNAME OF MOTHER	LEGAL SURNAME	DATE OF BIRTH		
ADDRESS OF MOTHER	STREET	CITY	STATE	ZIPCODE
PHYSICAL DESCRIPTION OF MOTHER				

Part 4 CHILD'S INFORMATION (If exact date of birth unknown, provide estimated date of birth)

FULL NAME OF CHILD	FIRST	MIDDLE	LAST INCLUDING SUFFIX	SEX
DATE OF BIRTH	CITY OF BIRTH	COUNTY OF BIRTH	STATE OF BIRTH	

The \$9.00 search fee includes the issuance of a certificate signed by the State Registrar certifying that:

- The identity and contact information, if any, for each registered unmarried biological father whose information matches the search request sufficiently so that such person may be considered a possible father of the subject child;
- OR
- That a diligent search has been made of the registry of putative fathers who may be the unmarried biological father of the subject child and that no matching registration has been located in the registry.

\$9.00

RUSH ORDERS(Optional): For rush Orders, there is a \$10.00 additional fee per order. Check the appropriate box. If RUSH service is desired, enter \$10.00 in the amount column. Mark your envelope **"RUSH"** **RUSH SERVICE DESIRED** Yes No

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TOTAL AMOUNT ENCLOSED: Check or Money Order Payable to Vital Statistics. International payments should be made by Cashiers Check or

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Money Order in U.S. Dollars. **(DO NOT SEND CASH)** *Florida Law imposes an additional service charge of \$15.00 for dishonored checks.*

Any person who willfully and knowingly provides any false information in a certificate, record, or report required by Chapter 382, Florida Statutes, or in an application or affidavit, or who obtains confidential information contained in any Vital Record under false or fraudulent purposes, commits a felony of the third degree, punishable as provided in Chapter 773, Florida Statutes.

APPLICANT NAME/DELIVERY INFORMATION

APPLICANT NAME	FIRST	MIDDLE	LAST	SUFFIX
DELIVERY ADDRESS (INCLUDE APT. NUMBER, IF APPLICABLE)		CITY	STATE	ZIPCODE
HOME PHONE NUMBER INCLUDING AREA CODE		WORK PHONE NUMBER INCLUDING AREA CODE	SIGNATURE OF APPLICANT	
IF ATTORNEY or AGENCY, PROVIDE BAR/LICENSE NUMBER		IF ATTORNEY, PROVIDE NAME OF PERSON YOU REPRESENT AND THEIR RELATIONSHIP TO CHILD		

IF THE CERTIFICATION IS TO BE MAILED TO ANOTHER PERSON OR ADDRESS USE THE SPACES BELOW TO SPECIFY SHIP TO NAME AND ADDRESS

SHIP TO NAME TYPE OR PRINT	FIRST	MIDDLE	LAST	SUFFIX
DAYTIME PHONE NUMBER ()	SHIP TO STREET ADDRESS (AND APT.)			
	CITY		STATE	ZIP CODE

INFORMATION AND INSTRUCTIONS FOR FLORIDA PUTATIVE FATHER SEARCH

This form is to be used only when a search of the Putative Father Registry is requested. **DO NOT** use to file a Claim of Paternity. Use Claim of Paternity, DH Form 1965, for filing with the Florida Putative Father Registry

NOTE: To enable a thorough search it is important that you provide as much information as known regarding the putative father, mother and child.

ELIGIBILITY: All information contained in the Florida Putative Father Registry is confidential and exempt from public disclosure. Information from the registry shall only be disclosed to:

- a) An adoption entity in connection with the planned adoption of a child.
- b) The registrant unmarried biological father upon receipt of his notarized request.
- c) The court, upon issuance of a court order concerning a petitioner acting pro se in an action under Chapter 63, Florida Statutes
- d) Birth mother, upon receipt of a notarized request for copy of any registry entry in which she is identified as the birth mother.

“Adoption Entity” as defined in x. 63.032(3), Florida Statutes, means the department, an agency, a child-caring agency registered under s. 409.176 Florida Statutes, an intermediary, or a child-placing agency licensed in another state which is qualified by the department to place children in the State of Florida.

“Department” as defined in 63.032(8), Florida Statutes, means the Department of Children and Family Services.

“Agency” as defined in 63.032(5), Florida Statutes, means any child-placing agency licensed by the department pursuant to 63.202 to place minors for adoption.

“Intermediary” as defined in 63.032(9), Florida Statutes, means an attorney who is licensed or authorized to practice in this state and who is placing or intends to place a child for adoption, including placing children born in another state with citizens of this state or country or placing children born in this state with citizens of another state or country.

The Bureau of Vital Statistics has no legislative requirement for following up with an applicant after the initial search and advising of any claim that has been received subsequent to the initial search. Depending on where you are in the legal proceedings process, this may mean that you must again search the registry for filing with the court. Florida law requires that the registry be searched at the time a Petition for Termination of Parental Rights or adoption proceedings are filed.

RESPONSE TIME: Response time for processing a request varies depending upon our workload at the time your request is received. Generally, a request is completed within five work days. RUSH processing is available for those who need assurance of faster service. Orders received in an envelope marked RUSH and with the \$10.00 RUSH fee will be given priority over other pending work; however, no certification can be issued until all requirements, forms, applicable fees and appropriate signatures have been received and meet the criteria as established by law or in rules of the department.

*****To be used only when the applicant is a Putative Father who has filed a Claim of Paternity or Birth Mother*****

NOTARIZED AFFIDAVIT OF PUTATIVE FATHER OR BIRTH MOTHER

<p><i>I do hereby swear or affirm that I am the registrant and request search of the Florida Putative Father Registry for a copy of my registry entry. I have attached a copy of photo identification.</i></p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Printed Name</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Signature</p>	<p style="text-align: center;"><input type="checkbox"/> Personally Known or <input type="checkbox"/> Produced Identification</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Type of Identification Produced</p>
<p>State of _____</p> <p>County of _____</p> <p>Subscribed and sworn before me this _____ day of _____, 20_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Printed Name of Notarizing Official</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Signature of Notarizing Official</p>	<p style="text-align: center;">(Place Notary Stamps Here)</p>

MAIL TO: DEPARTMENT OF HEALTH, VITAL STATISTICS, P. O. CO 210, JACKSONVILLE, FL 32231-0042
 Visit our website at: <http://www.floridahealth.gov>

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.915, DESIGNATION OF CURRENT MAILING AND E-MAIL ADDRESS (11/15)

When should this form be used?

This form should be used to inform the clerk and the other **party** of your current mailing and e-mail address(es) or **any change of address**. It is very important that the court and the other party in your case have your correct address.

A party not represented by an attorney may choose to designate e-mail address(es) for **service**. A primary and up to two secondary e-mail addresses can be designated. If you do so and the other party is represented by an attorney or has also designated e-mail address(es) for service, e-mail will be the **exclusive means of service**.

If there is any change in your mailing or e-mail address(es), you must complete a new form, file it with the clerk, and serve a copy on any other party or parties in your case.

What should I do next?

This form should be typed or printed in black ink. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where your case is filed and keep a copy for your records. A copy of this form must be served on any other party in your case. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

IMPORTANT INFORMATION REGARDING E-FILING

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic

mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you must review Florida Rule of Judicial Administration 2.516. You may find this rule at www.flcourts.org through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO. If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

Where can I look for more information?

Before proceeding, you should read General Information for Self-Represented Litigants found at the beginning of these forms. The words that are in **bold underline** in these instructions are defined there.

Special notes...

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT,
IN AND FOR OKALOOSA COUNTY, FLORIDA

Case No.: _____
Division: _____

Petitioner

and

Respondent.

DESIGNATION OF CURRENT MAILING AND E-MAIL ADDRESS

I, *{full legal name}* _____, being sworn, certify that
my current mailing address is: *{Street}* _____
{City} _____, *{State}* _____ *{Zip}* _____
{Telephone No.} _____ *{Fax No.}* _____.

I designate as my current e-mail address(es): _____

I understand that I must keep the clerk's office and the opposing party or parties notified of my current mailing and e-mail address(es) and that all future papers in this lawsuit will be served at the address(es) on record at the clerk's office.

I certify that a copy of this document was () e-mailed () mailed () faxed
() hand-delivered to the person(s) listed below on *{date}* _____.

Other party or his/her attorney:

Name: _____
Address: _____
City, State, Zip: _____
Fax Number: _____
Designated E-mail Address(es): _____

Dated: _____

Signature of Party

STATE OF FLORIDA
COUNTY OF OKALOOSA

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

*[Print, type, or stamp commissioned name of notary
or clerk.]*

_____ Personally known
_____ Produced identification
Type of identification produced _____

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE
BLANKS BELOW:**

[fill in **all** blanks] This form was prepared for the: *{choose only one}* () Petitioner () Respondent
This form was completed with the assistance of:

{name of individual} _____,
{name of business} _____,
{street} _____,
{city} _____, *{state}* _____, *{zipcode}* _____, *{telephone number}* _____.