PLEASE READ THE IMPORTANT INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS PAGE *Please type or print in dark blue or black ink*

5.40-1 ×2.40 ×3.40	CHILD'S INFORMATION			
Name: Baby	Allen	Buck		
(First)	(Middle)	(Last)	(Suffix, if applicable (i.e. Jr/Sr))	
Date of Birth: 07/31/2021 (Mo/Day/Year)	Place of Birtl	n: <u>Columbus</u> (City)	Ohio Franklin (State) (County)	
CurrentResidence: 30 East Broad Street (Full Street Address)	Columbus (City)	Ohio (State)	43215 (Zip)	
If a birth certificate for the child has already been filed, do you now wish to <u>change</u> the child's name? 🗖 YES 🗖 NO				
If "YES", give the child's <u>new</u> name:(First)) (Middle)	(Last)	(Suffix, if applicable (i.e. Jr/Sr))	
MOTHER'S AFFIRMATION (Name at the time of child's birth)				
Name: Jane Alicia	Doe	Maiden N	lame:	
(First) (Middle)	(Last)			
Address: 30 East Broad Street (Full Street Address)	Columbus (City)	Ohio (State)	43215 (Zip)	
Date of Birth: 5/25/1989	Social Se	curity Number:	123-45-6789	
(Mo/Day/Year)		quired to provide your social	you do not have a SSN enter N/A) security number in accordance with federal law at imber will be used for child support purposes only.	
State of Ohio, County ofFran	SIGNATURE AND NOT klin, ss. I state under d		hat I have read or had read to me all	
information on both sides of this form; that the information I have supplied for this form is true to the best of my knowledge and belief; that I have received information regarding my legal rights and responsibilities; and that I am the natural mother of the child named on this form				
and I assume the parental duty of support of the		iu man am me naturar	mourer of the child hamed on this form	
7				
Jane Doe Signature of the Mother (Please read page one	(1) before signing your name		(SEAL)	
			6 Tanit Decora	
Before me appeared the above named person (moth	ner) who signed this affidavit			
under oath or by affirmation on this 31st		n the year <u>2021</u> .		
John J. Notary	1/31/2026			
John J. Notary Signature of Notary Public	1/31/2026 Expiration of C			
		ommission		
Signature of Notary Public	Expiration of C	ommission		
	Expiration of Control	ommission		
Signature of Notary Public Name: John Allen (First) (Middle)	FATHER'S AFFIRM Buck (Last) (Su	ATION ffix, if applicable (i.e. Jr/Sr))	43215	
Signature of Notary Public Name: John Allen	Expiration of C FATHER'S AFFIRM Buck	ATION	43215 (Zip)	
Signature of Notary Public Name: John Allen (First) (Middle) Address: 30 East Broad Street	FATHER'S AFFIRM Buck (Last) (Su	ATION ffix, if applicable (i.e. Jr/Sr)) Ohio	10.0 miles	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth	FATHER'S AFFIRM Buck (Last) (Su Columbus (City)	Fix, if applicable (i.e. Jr/Sr)) Ohio (State)	(Zip)	
Signature of Notary Public Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se	ATION Ffix, if applicable (i.e. Jr/Sr)) Ohio (State)	(Zip) 23-45-6789 you do not have a SSN enter N/A)	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se	ATION Ffix, if applicable (i.e. Jr/Sr)) Ohio (State) curity Number:1 equired to provide your social	(Zip) 23-45-6789	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US	ATION ffix, if applicable (i.e. Jr/Sr)) Ohio (State) curity Number:	(Zip) 23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio , County of Fra	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin , ss. I state unde	ATION Fix, if applicable (i.e. Jr/Sr)) Ohio (State) equired to provide your social acceptable (666, your social security number) ARIZATION To oath or by affirmation	(Zip) 23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at imber will be used for child support purposes only.	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio , County of Frainformation on both sides of this form; that the information of the state o	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin, ss. I state under	ATION fix, if applicable (i.e. Jr/Sr)) Ohio (State) equired to provide your social acceptable (666, your social security number) ARIZATION To ath or by affirmation or this form is true to the	(Zip) 23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at imber will be used for child support purposes only. In that I have read or had read to me all to best of my knowledge and belief; that	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio , County of Fra	Expiration of C FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin, ss. I state under information I have supplied for rights and responsibilities; the	ATION Fix, if applicable (i.e. Jr/Sr)) Ohio (State) equired to provide your social is 666, your social security number at this form is true to the at I consent to the juris	(Zip) 23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at amber will be used for child support purposes only. In that I have read or had read to me all a best of my knowledge and belief; that diction of the courts of this state; and	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio County of Frainformation on both sides of this form; that the indicate the content of the country of	Expiration of C FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin, ss. I state under information I have supplied for rights and responsibilities; the	ATION Fix, if applicable (i.e. Jr/Sr)) Ohio (State) equired to provide your social is 666, your social security number at this form is true to the at I consent to the juris	(Zip) 23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at amber will be used for child support purposes only. In that I have read or had read to me all a best of my knowledge and belief; that diction of the courts of this state; and	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio County of Frainformation on both sides of this form; that the indicate the content of the country of	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin , ss. I state under information I have supplied for rights and responsibilities; the on this form and I assume the	ATION Fix, if applicable (i.e. Jr/Sr)) Ohio (State) equired to provide your social is 666, your social security number at this form is true to the at I consent to the juris	(Zip) 23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at amber will be used for child support purposes only. In that I have read or had read to me all a best of my knowledge and belief; that diction of the courts of this state; and	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio County of Frainformation on both sides of this form; that the indicate the indicate that I am the natural father of the child named of the Father (Please read page one (1) before significant to the child named of the Father (Please read page one (1) before significant that I am the natural father of the child named of the Father (Please read page one (1) before significant that I am the natural father of the child named of the Father (Please read page one (1) before significant that I am the natural father of the child named of the Father (Please read page one (1) before significant that I am the natural father of the child named of the Father (Please read page one (1) before significant that I am the natural father of the child named of the Father (Please read page one (1) before significant that I am the natural father of the child named of the Father (Please read page one (1) before significant that I am the natural father of the child named of the Father (Please read page one (1) before significant that I am the natural father of the child named of the Father (Please read page one (1) before significant that I am the natural father of the child named of the father (Please read page one (1) before significant that I am the natural father of the child named of the father (Please read page one (1) before significant that I am the natural father of the child named of the father (Please read page one (1) before significant that I am the natural father of the child named of the father (Please read page one (1) before significant that I am the natural father of the child named of the father (Please read page one (1) before significant the father (Please read page one (1) before significant the father (Please read page one (1) before significant the father (Please read page one (1) before significant the father (Please read page one (1) before	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin , ss. I state under information I have supplied for rights and responsibilities; the on this form and I assume the ming your name) Signature of ming your name)	ATION Fix, if applicable (i.e. Jr/Sr)) Ohio (State) equired to provide your social is 666, your social security number at this form is true to the at I consent to the juris	(Zip) 23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at amber will be used for child support purposes only. In that I have read or had read to me all a best of my knowledge and belief; that diction of the courts of this state; and ort of the child.	
Name: John (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio , County of Frainformation on both sides of this form; that the ill have received information regarding my legal that I am the natural father of the child named of John Buck	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin, ss. I state under information I have supplied for rights and responsibilities; the conthis form and I assume the conting your name) Signature of ming your name) er) who signed this affidavit	ATION Fix, if applicable (i.e. Jr/Sr)) Ohio (State) equired to provide your social is 666, your social security number at this form is true to the at I consent to the juris	23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at amber will be used for child support purposes only. In that I have read or had read to me all the best of my knowledge and belief; that diction of the courts of this state; and ort of the child. (SEAL)	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio County of Frainformation on both sides of this form; that the indicate that I am the natural father of the child named of the Father (Please read page one (1) before significant to the significant of	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin, ss. I state under information I have supplied for rights and responsibilities; the conthis form and I assume the conting your name) Signature of ming your name) er) who signed this affidavit	ATION Flix, if applicable (i.e. Jr/Sr)) Ohio (State) ecurity Number:	23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at amber will be used for child support purposes only. In that I have read or had read to me all the best of my knowledge and belief; that diction of the courts of this state; and ort of the child. (SEAL)	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio County of Frainformation on both sides of this form; that the indicate of the child named of the father (Please read page one (1) before sign Before me app eared the above named person (father under oath or by affirmation on this 31st	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin, ss. I state under information I have supplied for rights and responsibilities; the conthis form and I assume the conting your name) Signature of raing your name) er) who signed this affidavit day of July	ATION flix, if applicable (i.e. Jr/Sr)) Ohio (State) curity Number:	23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at amber will be used for child support purposes only. In that I have read or had read to me all the best of my knowledge and belief; that diction of the courts of this state; and ort of the child. (SEAL)	
Name: John Allen (First) (Middle) Address: 30 East Broad Street (Full Street Address) State or: Ohio Country of Birth Date of Birth: 2/23/1989 (Mo/Day/Year) State of Ohio County of Frainformation on both sides of this form; that the indicate that I am the natural father of the child named of the Father (Please read page one (1) before significant to the significant of	FATHER'S AFFIRM Buck (Last) (Su Columbus (City) Social Se You are re 42 US SIGNATURE AND NOT anklin , ss. I state under information I have supplied for 1 rights and responsibilities; the conting this form and I assume the conting your name) Signature of ming your name) er) who signed this affidavit day of July	ATION flix, if applicable (i.e. Jr/Sr)) Ohio (State) curity Number:	23-45-6789 you do not have a SSN enter N/A) security number in accordance with federal law at amber will be used for child support purposes only. In that I have read or had read to me all the best of my knowledge and belief; that diction of the courts of this state; and ort of the child. (SEAL)	

JFS 07038 (Rev. 5/2014) Page 2 of 2

CPR#

ODH File#

Registrar#

EBC#

CSEA#