

# Completing Voluntary Acknowledgment of Paternity Affidavit 45-21

The Voluntary Acknowledgment of Paternity Affidavit (AOP) establishes paternity for children born to unmarried mothers. It also creates legally binding duties upon both parents for the child named in the Affidavit including financial support of the child.

There are two paternity forms.

- The Voluntary Acknowledgment of Paternity (form 45-31) is completed before the mother is discharged from the birthing facility.
- The Voluntary Acknowledgment of Paternity Affidavit (form 45-21) is required once the mother has been discharged, if it has been more than five days since the birth of the child, or if the child was not born in a facility.
  - o The form is available online as a fillable PDF.
    - Voluntary AOP (form 45-21) English
    - Voluntary AOP (form 45-21) Spanish

This document covers the requirements for the Acknowledgment of Paternity Affidavit (form 45-21).

Many mistakes made on Acknowledgment of Paternity forms are easily avoidable and can be eliminated by taking a few moments to check for accuracy and completeness before sending in the form. Following these helpful hints will reduce the number of rejected forms and help the Center for Health Statistics add the father's name on the birth record as quickly as possible.

- **1. Use the correct form.** Form 45-21 should be used if you are no longer in a hospital or birthing facility or if it has been more than 5 days since the birth of your child. This form must be signed before a notary.
- 2. Read and understand all the information on the instruction page and the Statement of Rights and Responsibilities page. Parents who are signing the Voluntary Acknowledgment of Paternity (45-21) form must hear the Rights and Responsibilities found on the back of the form. Parents may also watch a video recording of the Rights and Responsibilities in <a href="English">English</a> or in <a href="Spanish">Spanish</a>.

p. 1 Rev. 02/2025

**3.** Write legibly in ink or type in the information on the form. The form is a fillable pdf that can be printed out to fill in by hand or it can be filled in online before printing. To ensure all the information is legible, it is recommended to enter the required information before printing the form. Fully complete each field.

# Section 1 – Child, include:

- o Child's full name, as it currently appears on the record
- Date of birth
- Birthplace city and county
- Child's new last name as it should appear on the birth certificate only if the name is changing. Enter "N/A" if not changing.

SECTION 1 – CHILD (as named on birth certificate)						CSP USE ONLY
Child's name:	First	Middle		Last	Suffix (Example: Jr. or Sr.)	
Date of birth: (mm/c	dd/yyyy) Birthplace:	City	County		Child's new last name as it should appear (enter "N/A" if not changing):	on birth certificate

### • Section 2 - Natural Mother of Child, include:

- Mother's current full name
- Present address
- o Social Security Number, if willing to share
- Date of birth
- Birthplace State
- o Last name before any marriages; also known as maiden name
- Daytime telephone number

SECTION 2 – NATURAL MOTHER OF CHILD							
Mother's name:	First	Middle	Last		Suffix (Example: Jr. or Sr.)		
Present address:	No. and street	City	State	ZIP	Social Security number:		
Date of birth: (mm/dd/	yyyy) Birthplace State:	(If not United States, name count	ry) Last name before ar	ny marriages: (Maiden name)	Daytime telephone number:		

#### Section 3 – Natural Father of Child

- Father's full name
- Present address
- Social Security Number, if willing to share
- Date of birth
- Birthplace State
- Daytime telephone number

SECTION 3 – NATURAL FATHER OF CHILD							
Father's name:	First	Middle	Last		Suffix (Example: Jr. or Sr.)		
Present address:	No. and street	City	State	ZIP	Social Security number:		
Date of birth: (mm/dd/yyyy) Birthplace State: (If not United States, name country)					Daytime telephone number:		

p. 2 Rev. 02/2025

# Section 4 – Legitimation

This section is not mandatory. Only complete it if the parents of a child born out of wedlock married after the child was born. Enter the date and County in which the marriage took place. If applicable, enter the mother's new name as it should appear on the birth certificate. If the marriage took place outside of Oregon, provide a certified copy of the marriage certificate with this Affidavit. If the marriage took place in Oregon, you do not need to provide your marriage certificate. We can use the information provided in this section to locate your Oregon marriage record.

SECTION 4 – LEGITIMATION				
Date of Marriage:	If married in Oregon, enter the county of marriage:			
If applicable, enter mother's new name as it should appear on birth certificate:				

- 4. Check names on the Affidavit and make sure they match the names provided on the birth parent worksheet that was completed at the birthing facility. The child's full name and mother's last name before any marriages (maiden last name) on the form must exactly match the names on the birth record. Putting different parent names on the form will not change the names on the birth record.
- **5. Provide name change documents for mother's name.** If mother's current legal name no longer matches the legal name she was using when the child was born, provide a copy of the document that granted the name change. This document is needed to verify the mother listed on the record and the mother named in the Affidavit are the same person. Examples of documents that can change a name are marriage records and court orders of name change.
- **6. Check for alterations.** It is best not to change or alter information on the form. This is a legal form; it cannot be altered once it is filled out. Redo the form if a mistake is made.

p. 3 Rev. 02/2025

7. Print name and sign and date the form in the presence of a notary to witness mother and father signatures.

Note: Wait to complete this step until you are with the notary!

N	IOTHER'S NAME AND SIGNATURE – DO NOT SIG	N UNTIL NOTARY IS PRESENT		
L	(Mother's printed name)	(Mother's signature)		(Date signed)
			NOTARY SEAL	
RY	ed in the State of, County of			
A F	This instrument was acknowledged before me on:			
ı	(Date)	(Name of mother)		
O N	X	My commission expires:		
2	(Signature of notarial officer)	(Date)		
F	ATHER'S NAME AND SIGNATURE - DO NOT SIG	N UNTIL NOTARY IS PRESENT		
		X		
L	(Father's printed name)	(Father's signature)		(Date signed)
			NOTARY SEAL	
۲ ۲	Signed in the State of, Co			
A,	This instrument was acknowledged before me on:			
7	(Date)	(Name of father)		
0 N	X	My commission expires:		
2	(Signature of notarial officer)	(Date)		

**8.** Mail the form and any applicable fees to Oregon Vital Records, PO Box 14050, Portland, OR 97293-0050. We offer a two-week window for free processing for these Affidavits. To qualify for free processing a completed and notarized Affidavit must be submitted to our office no more than two weeks from the child's date of birth. A \$35 processing fee is required for Affidavits that are submitted more than two weeks after the child is born.

If you need additional assistance or have questions about the Acknowledgment of Paternity contact the Amendments unit at <a href="mailto:CHS.Amendments@oha.oregon.gov">CHS.Amendments@oha.oregon.gov</a>.

p. 4 Rev. 02/2025