

Declaration of fatherhood

Please write in Block Letters

I the undersigned _____
acknowledge that I am the father of the male / female child born on ____ / _____ 20 ____,
of (the mother's name), _____
_____ who has declared that I
am the father.

I furthermore agree to pay child support from ____ / _____ 20 __ until the child reaches
18 years of age. The amount shall be equal to a single / _____ / child support and
payable monthly in advance on the first day of each month. Child support accrued at the time of the
ratification of an agreement on child support shall be paid on ____ / _____ 20 __.

With my signature on this document I confirm that I have acquainted myself with the legal
consequences according to the Act in Respect of Children No. 76/2003 and the Inheritance Law No.
8/1962 of admitting the paternity of a child.

Place and date

Signature of alleged father

ID No. / Date of birth

Address (Full mailing address)

Telephone: Home

Work

Mobile

Signed in our presence d. u. s.:

Witness:

Name

ID No. / Date of birth

Address (Full mailing address)

Witness:

Name

ID No. / Date of birth

Address (Full mailing address)