

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT, COUNTY DIVISION

IN THE MATTER OF NOTICE TO:

Putative Father: _____

Address: _____

City/State/Zip: _____

No. _____

DECLARATION OF PATERNITY WITH ENTRY OF APPEARANCE (2769)

I, _____ state as follows:

- 1. That I am _____ years of age; that I reside at _____ in the County of _____, State of _____.
2. That I have been advised that _____ is the mother of a [] male [] female child, with the initials _____, born on _____, or expected to be born on or about _____, and that such mother has stated that I am the father of this child.
3. I am the father of this child.
4. I further understand that the mother of this child wishes to consent to the adoption of the child. I do not consent to the adoption of this child.
5. I understand that in order to establish my parental rights in this child, I must do both of the following:
(a) I must return this Declaration of Paternity with Entry of Appearance form to the Clerk of the Circuit Court of Cook County, Illinois, located at Room 1202, Richard J. Daley Center, Chicago, Illinois 60602, within 30 days of receipt of this notice; AND,
(b) I must initiate a separate action to establish my paternity of this child pursuant to the Illinois Parentage Act of 2015 (750 ILCS 46/101 it seq.) within 30 days of my receiving this notice, or if the child is not yet born, within 30 days after the birth of the child.

* Note: You may also be required to register with the Putative Father Registry (750 ILCS 50/12d) within 30 days of the child's birth in order to establish parental rights in the child. For information call 866-737-3237.

6. I hereby enter my appearance in the above entitled cause, and request notice of the birth of the child, and date of birth if not yet born.

Signature

OATH

Under penalties for perjury provided by Section 1-109 of the Code of Civil procedure I state that I have read and understand this Declaration of Paternity with Entry of Appearance. The facts that it contains are true and correct to the best of my knowledge, and I understand that by signing this document I admit paternity. I have signed this document as my free and voluntary act.

Dated: _____

Signature: _____ Printed Name: _____

Signed and Sworn before me on this _____ day of _____.

Notary Public