

**BIBB COUNTY SUPERIOR COURT**

**STATE OF GEORGIA**

\_\_\_\_\_  
Plaintiff

vs.

Civil Action No. \_\_\_\_\_

\_\_\_\_\_  
Defendant

**PETITION FOR LEGITIMATION**

The Plaintiff files this action, and states the following in support of his petition:

1.

I believe I am the father of the following minor child(ren), born out of wedlock:

Current Name of Child	Male/Female	Year of Birth

2.

Jurisdiction and venue are proper in this Court because:

[Check and complete only one of the following, (a) through (e) of this paragraph]

**If none of these applies, you cannot file for Legitimation in Bibb County**

- (a) the Defendant mother resides in Bibb County, Georgia.
- (b) the Defendant mother resides in Georgia outside Bibb County, but the child or I reside in Bibb County, and the mother has consented to venue here.
- (c) the Defendant mother resides outside the State of Georgia and the child or I reside in Bibb County, Georgia.
- (d) the whereabouts of the Defendant mother are unknown and the child or I reside in Bibb County, Georgia.
- (e) the mother of the child is deceased and the child or I reside in Bibb County, Georgia.

3.

The Defendant, \_\_\_\_\_ is child's mother.

[Check and complete only one of the following.]

- The mother's address is -

\_\_\_\_\_  
 \_\_\_\_\_

- The mother is deceased.

4.

- No other man is shown as father on the birth certificate, and the mother was not married to any other man at the time of the child's conception or birth.

5.

[Check and complete all that apply below.]

The child lives with the following person who takes care of the child:

- The Defendant/mother
- The Plaintiff/father
- Neither the child's mother nor the Plaintiff. Instead the child lives with \_\_\_\_\_, whose relationship to the child is \_\_\_\_\_ . They reside at the following address: \_\_\_\_\_ in \_\_\_\_\_ County, in the State of \_\_\_\_\_ .

6.

My paternity of the child has been established by a court or by operation of law based on the child's birth certificate or, if paternity has not been legally established, I state that I am the child's natural father. I want to legitimate my relationship with the child, as provided in OCGA§ 19-7-22. so that the child will have full rights as my child, and I will have full rights as the father of the child, I believe that legitimation would be in the child's best interest.

7.

[Check and complete all that apply below]

I want the birth records of the child to be changes as follows:

- I want the child's last name to be changed on the birth record to my last name.
- I want my name to be entered as the father on the birth record.
- No chance are necessary on the birth record concerning either the father's name or the child's last name.

8.

[Check and complete part (a) or part (b), but **not** both]

- (a) There is already a child support order concerning the child. This current order was issued by the \_\_\_\_\_ Court/Agency in court case number \_\_\_\_\_. It requires me to pay \$ \_\_\_\_\_ per \_\_\_\_\_.
- (b) There is currently no child support order concerning the child.

THEREFORE, the Plaintiff asks:

[Check and complete only the ones that apply below]

- (a) That process issue and the Defendant be served with a copy of this *Petition for Legitimation*;
- (b) That the Court order service by publication for the Defendant mother, whose address unknown. I am filling my Affidavit(s) of diligent Search with this Petition, and incorporate it here by reference.
- (c) I ask that the Court enter an Order legitimating my relationship with the child, so that the child will be recognized as my legitimate child, capable of inheriting in the same manner as if born in lawful wedlock;
- (d) That the last name of the child be changed to my last name;
- (e) That the Department of Vital Statistic be ordered and directed to amend the child's birth record and to reissue the birth certified as follows:

[If you checked (e), you must also check & complete all that apply out of two]

- (1) entering my name as the father on the birth record
- (2) changing the child's last name to my last name

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Plaintiff, Pro Se (Signature)

- (f) I asked that the Court enter an *Order* providing for specific, liberal visitation privileges for me with the minor child.
- (g) I ask that the Court enter and *Order* granting the following custody:
  - (1) Joint legal custody of the minor child to be shared between the parents, with shared decision making authority and full access to all information concerning the child's education, religious training, and medical care
  - (2) Sole legal and physical custody of the minor child to me
- (h) That the Court grant such other and further relief as the Court deems fair and proper

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
[day] [month] [year]

\_\_\_\_\_  
Plaintiff, Pro Se (Signature)  
Plaintiff's Name (print or type): \_\_\_\_\_  
Plaintiff's Address: \_\_\_\_\_  
\_\_\_\_\_  
Plaintiff's Telephone Number: \_\_\_\_\_

Sworn to and affirmed before  
this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public (Seal)  
My commission expires: \_\_\_\_\_

**STATE OF GEORGIA**

**COUNTY OF BIBB**

**VERIFICATION**

Personally appeared before the undersigned officer authorized by law to administer oaths, the deponent herein, who, an oath, deposes and says that the facts contained in the foregoing document are true and correct.

\_\_\_\_\_

\_\_\_\_\_

DEPONENT

Sworn to and subscribed before me

this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

**AFFIDAVIT FOR PERSON FILING CASE WITH NO ATTORNEY**  
**(All questions must be answered.)**

\_\_\_\_\_  
Plaintiff

vs.

Civil Action No. \_\_\_\_\_

\_\_\_\_\_  
Defendant

PERSONALLY appeared before me the undersigned officer, \_\_\_\_\_  
(Affiant)

who after being duly sworn deposes and states under oath the following:

- (1) That affiant has this date filed a suit for divorce or other complaint in this County and does not have an attorney at law representing affiant.
- (2) (a) Affiant further states that the following person prepared the Complaint and/or other papers.

\_\_\_\_\_  
Name of Person (and business name) who prepared papers

\_\_\_\_\_  
Address of such person and business

\_\_\_\_\_  
Telephone number of such person and business

- (b) Affiant state that said person who prepared the paper (was/was not) paid to prepare the papers. The total amount paid \$\_\_\_\_\_.
- (3) Affiant further states that there (is/is not) any further money due anyone for assisting in the preparation of said papers. If affiant owes money to the preparer the amount is \$\_\_\_\_\_.
- (4) Affiant has not paid or given anyone any other consideration of money for helping in preparing the paper, except the following, \_\_\_\_\_.
- (5) Did the preparer of the papers tell you what information, or give you advice regarding the information to put in any of your paper? (YES / NO)
- (6) Did the preparer give you any advice about how to file your papers? (YES / NO)
- (7) Did the preparer give you any advice about how to present your case to the judge? (YES / NO)
- (8) Are you willing to discuss this matter with a State Bar or Georgia investigator? (YES / NO)

I have answered all the about questions truthfully, under criminal penalties of perjury.

Sworn to and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Affiant

\_\_\_\_\_  
Address

\_\_\_\_\_  
Notary Public  
My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Phone No. (required): \_\_\_\_\_

**SUPERIOR COURT OF BIBB COUNTY**  
**PARTIES INFORMATION SHEET**  
**TO BE FILED WITH COMPLAINT/PETITION**

**Plaintiff's Contact Information:**

Plaintiff's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Defendant's Contact Information:**

Defendant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

CIVIL ACTION  
NUMBER \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
PLAINTIFF

VS.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
DEFENDANT

SUMMONS

TO THE ABOVE NAME DEFENDANT:

You are hereby summoned and required to file with the Clerk of said court and serve upon the Plaintiff's attorney whose name and address is:

an answer to the complaint which is herewith served upon you, within 30 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

This \_\_\_\_\_ day of \_\_\_\_\_

Clerk of Superior Court

BY \_\_\_\_\_  
Deputy Clerk



SHERIFF'S ENTRY OF SERVICE

Civil Action No. \_\_\_\_\_

Superior Court  Magistrate Court   
State Court  Probate Court   
Juvenile Court

Date Filed \_\_\_\_\_

Georgia, \_\_\_\_\_ COUNTY

Attorney's Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and Address of Party to Served

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Plaintiff

VS.

\_\_\_\_\_

Defendant

\_\_\_\_\_

Garnishee

SHERIFF'S ENTRY OF SERVICE

**PERSONAL**

I have this day served the defendant \_\_\_\_\_ personally with a copy of the within action and summons.

**NOTORIOUS**

I have this day served the defendant \_\_\_\_\_ by leaving a copy of the action and summons at his most notorious place abode in this County.

Delivered same into hands of \_\_\_\_\_ described as follows: age, about \_\_\_\_\_ years; weight \_\_\_\_\_ pounds; height \_\_\_\_\_ feet and \_\_\_\_\_ inches, domiciled at the residence of defendant.

**CORPORATION**

Served the defendant \_\_\_\_\_ a corporation by leaving a copy of the within action and summons with \_\_\_\_\_ In charge of the office and place of doing business of said Corporation in this County.

**TACK & MAIL**

I have this day served the above styled affidavit and summons on the defendant(s) by posting a copy of the same to the door of the premises designated in said affidavit and on the same day of such posting by depositing a true copy of same in the United States Mail, First Class in an envelope properly addressed to the defendant(s) at the address shown in said summons, with adequate postage affixed thereon containing notice to the defendant(s) to answer said summons at the place stated in the summons.

**NON EST**

Diligent search made and defendant \_\_\_\_\_ not to be found in the jurisdiction of this Court.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

DEPUTY CLERK

BIBB COUNTY, GEORGIA

# General Civil and Domestic Relations Case Filing Information Form

Superior or  State Court of \_\_\_\_\_ County

**For Clerk Use Only**

**Date Filed** \_\_\_\_\_ **Case Number** \_\_\_\_\_

**MM-DD-YYYY**

**Plaintiff(s)**

**Defendant(s)**

Last	First	Middle I.	Suffix	Prefix
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Last	First	Middle I.	Suffix	Prefix
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Plaintiff's Attorney** \_\_\_\_\_ **Bar Number** \_\_\_\_\_ **Self-Represented**

**Check One Case Type in One Box**

**General Civil Cases**

- Automobile Tort
- Civil Appeal
- Contract
- Garnishment
- General Tort
- Habeas Corpus
- Injunction/Mandamus/Other Writ
- Landlord/Tenant
- Medical Malpractice Tort
- Product Liability Tort
- Real Property
- Restraining Petition
- Other General Civil

**Domestic Relations Cases**

- Adoption
- Dissolution/Divorce/Separate Maintenance
- Family Violence Petition
- Paternity/Legitimation
- Support – IV-D
- Support – Private (non-IV-D)
- Other Domestic Relations

**Post-Judgment – Check One Case Type**

- Contempt
  - Non-payment of child support, medical support, or alimony
- Modification
- Other/Administrative

Check if the action is related to another action(s) pending or previously pending in this court involving some or all of the same parties, subject matter, or factual issues. If so, provide a case number for each.

\_\_\_\_\_ Case Number                      \_\_\_\_\_ Case Number

- I hereby certify that the documents in this filing, including attachments and exhibits, satisfy the requirements for redaction of personal or confidential information in O.C.G.A. § 9-11-7.1.
- Is an interpreter needed in this case? If so, provide the language(s) required. \_\_\_\_\_  
**Language(s) Required**
- Do you or your client need any disability accommodations? If so, please describe the accommodation request.  
\_\_\_\_\_  
\_\_\_\_\_

# ATTACHMENTS

Parenting Plan

Child Support Order Addendum

Case Disposition Form & 3907 Form

Other \_\_\_\_\_

## **INFORMATION FOR COMPLETING REQUIRED CHILD SUPPORT WORKSHEET**

1. Child Support Worksheet is required by the State of Georgia.
2. Bibb County Judges *require* that the Child Support Worksheet be printed.
3. Complete the worksheet to the best of your ability. The Superior Court Clerk's Office cannot help fill out the forms.
4. Go to <http://csc.georgiacourts.gov/> complete the form, submit it and print it out.
5. You **MUST** file the worksheet along with your case.

# General Civil and Domestic Relations Case Disposition Information Form

Superior or  State Court of \_\_\_\_\_ County

### For Clerk Use Only

Date Disposed \_\_\_\_\_  
MM-DD-YYYY

Case Number \_\_\_\_\_

Case Style \_\_\_\_\_

### Plaintiff(s)

Last	First	Middle I.	Suffix	Prefix
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### Defendant(s)

Last	First	Middle I.	Suffix	Prefix
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Reporting Party \_\_\_\_\_

Plaintiff's Attorney \_\_\_\_\_

Bar Number \_\_\_\_\_

Self-Represented

Defendant's Attorney \_\_\_\_\_

Bar Number \_\_\_\_\_

Self-Represented

### Manner of Disposition

#### Check Only One

- Jury Trial
- Bench/Non-Jury Trial
- Non-Trial Disposition
- Alternative Dispute Resolution

- Check if any party was self-represented at any point during the life of the case.
- Check if the court ordered an interpreter for any party, witness, or other involved individual.
- Was the case referred/ordered to a court-annexed alternative dispute resolution (ADR) process?

# eFile and Serve Registration & Quick Tips

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(PLEASE PRINT CLEARLY)

- Email: \_\_\_\_\_
  - Address: \_\_\_\_\_  
\_\_\_\_\_
  - Phone #: \_\_\_\_\_
  - Security Question? EX: What high school did you attend?  
Q \_\_\_\_\_  
A \_\_\_\_\_
  - Password: Abcd1234
  - Click on link sent to your email to activate your account.
  - Login to [www.efilega.com](http://www.efilega.com) from Kiosk or phone and change your password under manage security.
  - Scan documents
  - File your case
    - Tutorials and user guides are available online. To learn more, visit [www.efilega.com](http://www.efilega.com)
- 

Case / Envelope #: \_\_\_\_\_

**Cases filed with an agreement: File your Request Letter 46 days after filed date:**

**Cases filed with Sheriff Service: File your Request Letter 46 days after defendant has been served. You will receive notification once the defendant has been served with the email that you have on file.**

**Divorce by Publication: File Request Letter 60 days after 1<sup>st</sup> day of Publication; Publisher's Affidavit must be on file.**

**Adult Name Change: Take filed stamp Notice of Name Change to The Telegraph, File Request Letter 46 days after filing date, Publisher's Affidavit must be on file.**

**Minor Name Change: File Request Letter 46 days after filing date, , Publisher's Affidavit must be on file.**

**YOU MUST NOTIFY THE CLERK'S OFFICE OF ANY ADDRESS CHANGES OR TO UPDATE YOUR EMAIL ADDRESS BY FILING A NOTICE TO CHANGE ADDRESS.**

Clerk Assisted: \_\_\_\_\_

# Clase De Crianza Compartida En Línea

<https://www.OnlineParentingPrograms.com>



## Clase: Crianza Compartida En Línea

Clase de aprendizaje autónomo, educativa, en línea para los padres en proceso de divorcio/separación que nunca contrajeron matrimonio

Disponible en Inglés o Español

Visite el sitio web para precios de clase.



Regístrate en línea



Asiste en cualquier momento



Pone en pausa & vuelve a la clase



Descarga el certificado inmediatamente después de terminar la clase.

Descuentos disponibles para personas con bajos ingresos

**También Proporcionamos Clases De Crianza Compartida En Los Casos De Alto Conflicto**



Online Parenting Programs

Ofrecemos programas con descuentos para padres elegibles. Puedes encontrar información en línea: [www.onlineparentingprograms.com/financial-assistance.html](http://www.onlineparentingprograms.com/financial-assistance.html)

<https://www.OnlineParentingPrograms.com>

# Online Co-Parenting Class

<https://www.OnlineParentingPrograms.com>



## Class: Online Co-Parenting

Self-directed, online educational class for divorcing/separated or never married parents.

Available in English or Spanish

Check website for class pricing.



Register online



Attend anytime



Pause & resume



*Immediately  
download certificate  
upon completion.*

Low-Income/Indigent Discounts Available

Also Offering: **Online Parenting Skills  
& High Conflict Co-Parenting Classes**



Online  
Parenting  
Programs

Have Questions?

Call (866) 504-2883 or email us at:  
[support@onlineparentingprograms.com](mailto:support@onlineparentingprograms.com)

<https://www.OnlineParentingPrograms.com>





# Family Counseling

CENTER OF CENTRAL GEORGIA

## “Families in Transition” Seminar Schedule 2024

<b>In Person</b>	<b>Online</b>
Thursday, January 11 <sup>th</sup> 9:00am - 12:00pm	Tuesday, January 16 <sup>th</sup> 1:00pm - 4:00pm
Thursday, February 8 <sup>th</sup> 9:00am - 12:00pm	Tuesday, February 20 <sup>th</sup> 1:00pm - 4:00pm
Thursday, March 7 <sup>th</sup> 9:00am - 12:00pm	Tuesday, March 19 <sup>th</sup> 1:00pm - 4:00pm
Thursday, April 4 <sup>th</sup> 9:00am - 12:00pm	Tuesday, April 16 <sup>th</sup> 1:00pm - 4:00pm
Thursday, May 9 <sup>th</sup> 9:00am - 12:00pm	Tuesday, May 21 <sup>st</sup> 1:00pm - 4:00pm
Thursday, June 6 <sup>th</sup> 9:00am - 12:00pm	Tuesday, June 18 <sup>th</sup> 1:00pm - 4:00pm
Thursday, July 11 <sup>th</sup> 9:00am - 12:00pm	Tuesday, July 23 <sup>rd</sup> 1:00pm - 4:00pm
Thursday, August 8 <sup>th</sup> 9:00am - 12:00pm	Tuesday, August 20 <sup>th</sup> 1:00pm - 4:00pm
Thursday, September 5 <sup>th</sup> 9:00am - 12:00pm	Tuesday, September 17 <sup>th</sup> 1:00pm - 4:00pm
Thursday, October 10 <sup>th</sup> 9:00am - 12:00pm	Tuesday, October 22 <sup>nd</sup> 1:00pm - 4:00pm
Thursday, November 7 <sup>th</sup> 9:00am - 12:00pm	Tuesday, November 19 <sup>th</sup> 1:00pm - 4:00pm
Thursday, December 5 <sup>th</sup> 9:00am - 12:00pm	Tuesday, December 17 <sup>th</sup> 1:00pm - 4:00pm

**Macon:** 277 MLK Jr. Blvd, Suite 203  
Macon, GA 31201  
Ph: 478 745-2811  
Fax: 478-745-0881

**Warner Robins:** 106-B Olympia Dr.  
Warner Robins, GA 31092  
478 918-0663