## BIBB COUNTY SUPERIOR COURT

## STATE OF GEORGIA

In re:				
			Civil Action	
		Petitioner.	Case Number	
		PETITION TO CORREC	CT A BIRTH CEF	RTIFICATE
		[You must check and complete one	of the following, (a) or	(b), but not both.]
□ (a)		lling this petition to ask the Court to cate. In support of this petition, I st		an error on my own birth
□ (b)	parent petitio	listed on the child's birth certifican on behalf of the minor child name for an order to correct his/her birth	te, or his or her legal g ned	exactly as it appears on birth certificate
	My na	me is		_, and I live in BIBB County,
Georgi	ia. The □ (a)	refore, jurisdiction and venue are p  [If you are filing this petit you must also check one of the  The minor child lives with me in	tion on behalf of a mino e following, (a) or (b), bu	
	□ (b) in	The minor child does not live wit		d lives with
	[You i	must check and complete one of the j	2. following, (a), (b) or (c)	, but not more than one.]
□ (a) □ (b) □ (c)	I am a	ver the age of eighteen and I wish parent listed on the minor child's ne minor child's legal guardian.		•

This petition is being served upon the State Registrar of Vital Records, at 1600 Skyland Dr. NE Atlanta, GA 30319, and upon the Commissioner for the Georgia Department of Human Resources at Suite 29-250, 2 Peachtree St. NW, Atlanta, GA 30303-3142.

[If you are filing this petition on behalf of a minor child, you must **also** check & complete one or both of the following, (a) or (b), to list which people who will be served by the sheriff and which ones have signed an acknowledgment of service.]

[Note: if you do not know where the parent or guardian lives, you will need to consult with an attorney about how to proceed.]

	(a) 🗆	In addition, the petition is also being served by the sheriff on the minor child's:						
	(i) ☐ Legal Guardian, whose name isthe following address(es):							
		(ii) 🗆	Mother, whose name is					
		(iii) □	Father, whose name is					
	(b) ☐ The minor child's guardian / mother / father (circle all that apply) has/have acknowledged service of process and consented to the jurisdiction and venue of t Court. Their acknowledgment is filed with this Complaint.							
			4.					
	I ask th		Court enter an Order to correct birth certificate because: ek and complete all that apply in (a) through (g) of this paragraph.]					
□ (a)		The Department of Vital Records has informed me that I cannot change a given name after one year from the date of birth without a Court order.						
□ (b)	The Department of Vital Records has informed me that I cannot amend an item on a birth certificate if it was previously amended without a Court order.  [Note: Paternity and legitimation affidavits are considered to be amendments to a birth certificate if they have been filed with the Vital Records Office.]							

□ (c)	The Department of Vital Records has informed me that I cannot correct the year of birth by more than one year on a birth certificate without a court order.					
□ (d)	The minor child was born at (name of hospital),					
	and the child's mother was admitted to the hospital under her maiden name of					
	, rather than her married name of					
	The hospital did not ask about her marital status or the name of the father. When Petitioner contacted the Department of Vital Records to straighten out the matter, Petitioner was told they needed to have a court order to correct the child's birth certificate.					
	Because the parents were married before the child's birth and continue to be married, this child is automatically presumed to be a child of the marriage and, but for the error on the part of the hospital, the child would have the father's surname and his name would be listed on the					
	birth certificate. See Affidavit of  (Name of Parent signing Affidavit)					
	(Name of Parent signing Affidavit)					
□ (e)	The minor child is over one year old.					
□ (f)	I do not speak English. I provided the correct information to the staff at the hospital where the minor child was born, but the hospital staff failed to correctly write down the information I provided to them.					
□ (g)	The Department of Vital Records has informed me that a Court order is needed for the					
	following reasons:					
	[Note: If the Department of Vital Records has informed you that you must obtain a court order for a reason other than one listed above, you should consult a lawyer to see whether or not this form can assist you in filing your petition.]					
	5.					
	[You must check and file copies of at least one of the following documents, (a) through (h), to support your Petition.]					
I have	I have checked below to show the documents I am filing with my petition to support the facts stated in my request:					
□ (a)	Certified copy of the birth certificate that needs to be corrected					
□ (b)	Birth certificate(s) of minor child's parent(s) who are listed on the birth certificate					

□ (c)	Copy of court document showing I am the adoptive parent or legal guardian of the minor child							
□ (d)	Original or certified copies of church, school, census, or hospital records							
□ (e)	Copy of marriage certificate showing that I was already married to the minor child's other parent at the time the minor child was born.							
□ (f)	Affidavit of  (name of person signing Affidavit)							
□ (g)	Other (describe)	):						
□ (h)	Other (describe)	):						
		6.						
		[Check and complete all that apply in this paragraph.]						
	I am requesting	that the birth certificate be corrected as follows:						
□ (a)		which currently reads:						
□ (b)		which currently reads:						
□ (c)		which currently reads:						
□ (d)	Field #should read:	which currently reads:						
□ (e)	Field #should read:	which currently reads:						
	To the best of	7. my knowledge, the error(s) on the birth certificate occurred because:						

red:Petitioner, Pro se (Signature)  Name:Address:		
Petitioner, Pro se (Signature)  Name:  Address:	I do not intend to defraud	
Petitioner, Pro se (Signature) Name: Address: Phone (daytime): _()	HEREFORE, I ask that this Co	urt enter an order to direct that this birth certificate be corrected.
Petitioner, Pro se (Signature)  Name:  Address:	rated:	
Address:		Petitioner, Pro se (Signature)
Phone (daytime):()		Address:
		Phone (daytime):()

## STATE OF GEORGIA

## **COUNTY OF BIBB**

## **VERIFICATION**

Personally appeared before the undersigned officer authorizes 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.

PLAINTIFF

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

Notary Public

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

# 

Email Address:

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

Plair	ntiff	-	
vs.		Civil Action N	ło
Defe	endant	-	
	PERSONALLY appeared before me	the undersigned office	er,
		_	(Affiant)
who	after being duly sworn deposes and stat	es under oath the follo	wing:
(1)	That affiant has this date filed a suit does not have an attorney at law repr	esenting affiant.	•
(2)	(a) Affiant further states that the follopapers.	owing person prepared	the Complaint and/or other
	Name of Person (and business name)	who prepared papers	
	Address of such person and business		
	Telephone number of such person an		
	(b) Affiant state that said person who	prepared the paper (w	/as/was not) paid to prepare
(3)	the papers. The total amount paid \$ Affiant further states that there (is/is	 not) any further money	y dua anyona for assisting in
(3)	the preparation of said papers. If affia \$	= -	
(4)	Affiant has not paid or given anyone preparing the paper, except the follow		on of money for helping in
(5)	Did the preparer of the papers tell yo	u what information, or	give you advice regarding the
(6)	information to put in any of your pap Did the preparer give you any advice		r naners? (YES / NO)
(7)	Did the preparer give you any advice (YES / NO)	•	* * '
(8)	Are you willing to discuss this matter (YES / NO)	r with a State Bar or G	eorgia investigator?
I hav	ve answered all the about questions truth	fully, under criminal p	penalties of perjury.
Swo	rn to and subscribed before me		
	day of, 20	Affiant	
		Address	
Nota	ry Public	<u> </u>	
My (	Commission Expires	City	State Zip
		Phone No. (re	quired):

## **General Civil and Domestic Relations Case Filing Information Form**

		☐ Superior o	r 🗆 Stat	e Court	of		County		
	For Clerk Use O  Date Filed	•			Case Numbe	er			
Plainti	iff(s)				Defendant	t(s)			
Last	First	Middle I.	Suffix	Prefix	Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix	Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix	Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix	Last	First	Middle I.	Suffix	Prefix
Plainti	iff's Attorney				Bar Nun	nber	Self-	Represe	nted $\square$
			Chec	k One C	Case Type in (	One Box			
	Civil Ap Contrac Garnish General Habeas Injuncti Landlor Medical Product Real Pro	obile Tort peal t ment Tort Corpus on/Mandamus, d/Tenant Malpractice To		Writ		Maintenar Family Vio Paternity/ Support – Support – Other Don -Judgment – C Contempt Non-paym medical su Modificatio	n/Divorce/Sepa lence Petition Legitimation IV-D Private (non-IV nestic Relations Check One Case tent of child su	/-D) s e Type pport,	
	Check if the action of the same part	ies, subject mat				vide a case nur	ling in this cour	t involvin	g some or all
	I hereby certify the		nts in th	is filina i			exhibits satisfy t	he requi	rements for
_	redaction of pers			_	•				2
	Is an interpreter	needed in this c	ase? If s	o, provid	le the languag	ge(s) required.			<del></del>
							Language(s) F	Required	
	Do you or your o	client need any o	disability	accomn	nodations? If	so, please desc	cribe the accom	modatior	request.

## **ATTACHMENTS**

Parenting Plan	
Child Support Order Addendum	
Case Disposition Form & 3907 Form	
Other	

## **General Civil and Domestic Relations Case Disposition Information Form**

☐ Superior or ☐ State Court of County									
ı	For Clerk Use O	nly							
	Date Disposed				Case Numb	er			_
		MM-DD-Y	<b>/YYY</b>		Case Style _				_
Plaintiff	(s)				Defendar	nt(s)			
Last	First	Middle I.	Suffix	Prefix	Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix	Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix	Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix	Last	First	Middle I.	Suffix	Prefix
Reportir	ng Party								
Plaintiff	s Attorney				Bar I	Number	Se	elf-Repre	sented 🗆
Defenda	nnt's Attorney _				Bar I	Number	Se	elf-Repre	esented
Check O  Jur Ber No	of Disposition Inly One By Trial Inch/Non-Jury T In-Trial Disposit Alternative Dis	tion	on						
	Check if any par	ty was self-repr	esented a	at any po	int during th	ne life of the cas	se.		
	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 Registration & Quick Tips

## Register to eFile at: https://efilega.tylertech.cloud

Email:

<ul><li>Address:</li></ul>		
Address:		
• Phone #:		
<ul><li>Password: Al</li></ul>	ocd1234	
• Click on link	sent to your email to activate	e your account.
•	in, and save your documents ylertech.cloud to start filing	·
• File your case. For	assistance visit: <u>odysseyfilea</u>	ndservecloud.zendesk.com/hc/en-us
All communication abo	out your case will come to th	e email your provided above. You mus
file a 'Notice of Addres	s Change' form with the Cle	rk's Office if you need to update your
address or email. Add	no-replv@efilinamail.tvlerte	ch.cloud to your email contact.
		·
To view your case, visit	nttps://researchga.tylernos	st.net. You will log-in using the same
email and password yo	u use for eFileGA.	
Envelope #	Case #	(assigned when case is accepted
o Cases filed with Pov	verty Affidavit: You must wait u	ntil the Judge makes a decision on your
•	2	f your order is <u>denied</u> , you must pay the
filing fee of \$	·	ase. If your Poverty Affidavit is accepted,
		oply to the type of case you filed.
		etter 46 days after you receive notice that
· ·	ACCEPTED. Notification will be	·
	ceive email notification once the	Letter 46 days after Defendant has been
		ectronic filed-stamped <i>Notice of Name</i>
		unning in the paper, request the
_	- <del></del>	t into your case. File your Request Letter
after you file the Pu	~ _	,
•		you receive notice that your <i>Publisher's</i>
	ccepted into your case.	•

Clerk Assisted:

Date:\_\_\_\_