CONSULATE GENERAL OF THE PHILIPPINES) CITY OF CHICAGO) S STATE OF ILLINOIS, U.S.A.)		S.S.		
			Date: Registry No	
AFFIDAVIT OF ADMISSION OF PATERNITY				
l, _	Affiant's name		, citizen,	
	Affiant's name	Citize	zenship Civil Status	
of age, with address at			after being sworn in	
accordanc	e with law, do hereby depose and state	that:	:	
1.	That I am the biological father of the c	hild		,
	who was born on	at		·
2.	That at the time of birth of said child, I	am no	ot married to his/her mother,	
3.	That I hereby acknowledge my paterni	ty/filia	ation to the child,	·
 That I am executing this affidavit to attest the truth of the foregoing facts and for whatever legal purposes it may serve. 				
IN WITNESS WHEREOF, I have hereunto affixed my signature this day ofat				
		-	Signature of Father over Printed Name	_
	ED AND SWORN to before me this o	day of _	in the city/municip	ality
		-		
			Signature over Printed Name of the Administering Officer	
Doc. No. Page No. Book No. Series of				

REQUIREMENTS

- 1. Affidavit of Admission of Paternity (AAP) form in five (5) original copies.
- 2. Original and five (5) photocopies of the following:
 - a. Child's Birth Certificate
 - b. Marriage Certificate of parents, if applicable
 - c. Passport of the parent(s)
 - d. Alien Registration card or US Visa, if applicable
- 3. Processing fee of \$50.00 which includes:
 - a. \$25.00 Notarization and registration of the AAP.
 - b. \$25.00 Issuance of Certificate of Registration (CoR) for AAP.

Payment is non-refundable and payable in cash. Personal checks, personal money orders and credit cards are <u>not accepted.</u>

NOTE:

Applications should be filed personally and signed by the concerned parent before a Consular Officer. Mailed application is not accepted.

The Consular Officer reserves the right to require additional documents from the applicant.