	IN THE SUPERIOR COURT OF		COUNTY	
	STATE	OF GEORGIA		
In re	:			
15		G: 'I A .'		
		Civil Action		
		Case Number		
	Petitioner.			
		<u></u>		
	PETITION TO CORREC	CT A BIRTH CER	TIFICATE	
	[You must check and complete one	of the following, (a) or (i	b), but not both.]	
(a) (b)	I am filing this petition to ask the Court certificate. In support of this petition, I s My name is parent listed on the child's birth certificate.	tate as follows: , ate, or his or her legal gu	and I am the minor o	child's
	petition on behalf of the minor child nan	ned[print child's name e.	xactly as it appears on birt	th certificate]
	asking for an order to correct his/her birt follows:			
	My name is	4 -	and I live in	County
Georg	ia. Therefore, jurisdiction and venue are 1			
	[If you are filing this peti you must also check one of the			
	☐ (a) The minor child lives with me in _	County,	Georgia.	
	☐ (b) The minor child does not live with	th me. The minor child	lives with	in
	County, Geo	rgia.		2 107
	epocational care profession			
		2		

[You must check and complete one of the following, (a), (b) or (c), but not more than one.]

 \square (a) I am over the age of eighteen and I wish to amend an error on my own birth certificate. \square (b) I am a parent listed on the minor child's birth certificate. I am the \square mother \square father.

 \Box (c) I am the minor child's legal guardian.

COLDIEX

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 is	a	ıt
			the following address(es):		
		(ii) □	Mother, whose name is	at the	
		(11)	following address:		
			Tonowing additions.		
			7		
		(iii) □	Father, whose name is	at the	
			following address:		
	(I-) □	The	non child's expendice / mother / fother / in I - I	Late of source to be a cleaved	
	(b) 🗆		nor child's guardian / mother / father (circle ali vledged service of process and consented to the		nic
			Their acknowledgment is filed with this Comp	5.1	113
		00000	Then we work to the with the company to the company		
			4.		
	I ask tl	nat this (Court enter an Order to correct birth certificate	because:	
		[Chec	k 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			er	
one year from the date of birth without a Court order.					
\Box (b)	The Department of Vital Records has informed me that I cannot amend an item on a birth			h	
	certific		was previously amended without a Court order		
		_	Paternity and legitimation affidavits are considered		
		certifica	ate if they have been filed with the Vital Records O	IJice.j	

□ (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)			
□ (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			

Copy of court document showing I am the adoptive parent or legal guardian of the minor child
Original or certified copies of church, school, census, or hospital records
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.
Affidavit of (name of person signing Affidavit)
Other (describe):
Other (describe):
6.
[Check and complete all that apply in this paragraph.]
I am requesting that the birth certificate be corrected as follows:
Field # which currently reads:should read:
7. To the best of my knowledge, the error(s) on the birth certificate occurred because:

10	
	8.
I do not intend to defraud or cheat as	
HEREFORE Lask that this Court enter ar	Order to direct that this birth certificate be corrected.
THEREIT OTCE, I don't that this court effect at	of the tract that this birth continente be corrected.
9 1	
Pated:	D ('')
	Petitioner, Pro se (Signature)
	Name:
	Address:
	N-12-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2
	Phone (daytime):()

IN THE SUPERIOR COURT	OF	COUNTY
STA	ATE OF GEORGIA	
In re:		
	Civil Action	
	, Case Number	
Petitioner.		
VERIFIC	ATION OF PETITION	
TO CORREC	T A BIRTH CERTIFIC	CATE
I hereby swear or affirm, before	a notary public, that I have re	ad the <i>Petition to Correct a</i>
Birth Certificate, or it was read to me in	my native language, and the	facts stated in it are true.
un Acta de Nacimiento, o que se me ley	o en mi idioma, y que los hec	hos en esa son la verdad.
	Petitioner, pro se [Sig	gn in front of notary public.]
	Name:	
	Address:	
	Daytime Phone: _()
Subscribed and sworn before me on		
Notary Public		

Π	N THE SUPERIOR COURT OF	3	COUNTY
	STATE	E OF GEORGIA	
T -res 20000000			
In re:			
		Civil Action	
	Petitioner.	Case Number	
	Petitioner.		
	A DEUD A VIII	E IN CUIDDODT OF	
	PETITION TO CORR	T IN SUPPORT OF RECT BIRTH CERTI	FICATE
	ing first been placed under oath the following information is true		public, I hereby swear or
1.	My name isyears old. I am competent to		and I am
	years old. I am competent to	testify.	
2.	My relationship to the persor	with the incorrect birth ce	rtificate is as follows:
	☐ I am listed as the child's p		
	☐ I am the minor child's leg		
3.	I have the following informa Correct Birth Certificate		
4.	I am attaching the following	documents which support t	he information I have
stated in this Affidavit:			
		[Sign in front of N	otary Public]
		Print Name:	
		Address:	
		Telephone: ()	

Subscribed and sworn to before me

Notary Public

In re:		
		Civil Action
		, Case Number
	Petitioner.	
		SERVICE, CONSENT TO JURISDICTION
ANI	D VENUE, AND	CONSENT TO PRESENT CASE
My name is		. My relationship to the person with the incorrec
birth certificate is as	s follows:	
□Ia	um listed as the child	d's parent on the birth certificate
□ I a	m the minor child's	
		e received a copy of the <i>Petition to Correct Birth</i> iction and venue as they are stated in the Petition.
this action incorpora notice, my right to the	ntes the changes list rial and, if I am on a nd Sailors Civil Rel	requested in the <i>Petition</i> . So long as any Final Order in ed in the <i>Petition</i> , then I waive formal process, further active duty in the armed forces, I also waive my rights lief Act, 50 USC App. §521. I give my consent for the sible.
this action incorpora notice, my right to the under the Soldiers at Court to hear this m	ates the changes list rial and, if I am on a nd Sailors Civil Rel atter as soon as pos	ed in the <i>Petition</i> , then I waive formal process, further active duty in the armed forces, I also waive my rights lief Act, 50 USC App. §521. I give my consent for the
this action incorpora notice, my right to the under the Soldiers at Court to hear this m	ates the changes list rial and, if I am on a nd Sailors Civil Rel atter as soon as pos	ed in the <i>Petition</i> , then I waive formal process, further active duty in the armed forces, I also waive my rights lief Act, 50 USC App. §521. I give my consent for the sible. required for any reason, the notice should be mailed at
this action incorpora notice, my right to the under the Soldiers at Court to hear this m	ates the changes list rial and, if I am on a nd Sailors Civil Rel atter as soon as pos	ed in the <i>Petition</i> , then I waive formal process, further active duty in the armed forces, I also waive my rights lief Act, 50 USC App. §521. I give my consent for the sible. required for any reason, the notice should be mailed at
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this action incorpora notice, my right to the under the Soldiers at Court to hear this m	ates the changes list rial and, if I am on a nd Sailors Civil Rel atter as soon as pos	ed in the <i>Petition</i> , then I waive formal process, further active duty in the armed forces, I also waive my rights lief Act, 50 USC App. §521. I give my consent for the sible. required for any reason, the notice should be mailed at [Sign in front of Notary Public]
this action incorpora notice, my right to the under the Soldiers at Court to hear this m	ates the changes list rial and, if I am on a nd Sailors Civil Rel atter as soon as pos	ed in the <i>Petition</i> , then I waive formal process, further active duty in the armed forces, I also waive my rights lief Act, 50 USC App. §521. I give my consent for the sible. required for any reason, the notice should be mailed at [Sign in front of Notary Public] Print Name:
this action incorpora notice, my right to the under the Soldiers at Court to hear this m	ates the changes list rial and, if I am on a nd Sailors Civil Rel atter as soon as pos	ed in the <i>Petition</i> , then I waive formal process, further active duty in the armed forces, I also waive my rights lief Act, 50 USC App. §521. I give my consent for the sible. required for any reason, the notice should be mailed at [Sign in front of Notary Public] Print Name:
this action incorpora notice, my right to the under the Soldiers at Court to hear this m	ates the changes list rial and, if I am on a nd Sailors Civil Relatter as soon as postld further notice bess:	ed in the <i>Petition</i> , then I waive formal process, further active duty in the armed forces, I also waive my rights lief Act, 50 USC App. §521. I give my consent for the sible. required for any reason, the notice should be mailed at [Sign in front of Notary Public] Print Name: Address:

Notary Public

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

IN THE SUPERIOR COURT OF EFFINGHAM COUNTY STATE OF GEORGIA

PLAINTIFF(S) vs.))) Civil Action No
DEFENDANT(S))))
NOTIC	CE OF HEARING
Notice is hereby given to	the above-named parties that a hearing will be held
before the Honorable	, on
	_, 20 at:AM/PM in the Effingham County
Judicial Complex on the third fl	oor in the Courtroom.
Parties are directed and a	required to be and appear before the court at said date,
time and place ready for said he	earing.
This day of	
	Clerk/Deputy Clerk Superior Court Effingham County

IN THE SUPERIOR COURT OF	COUNTY
STATE OF GEORGIA	

In re:				
			Civil Action	
			Case Numbe	er _
	Petitioner.	,	Case I allies	
	FINAL ORDER A	AMENDIN	G BIRTH C	ERTIFICATE
This m	natter came before the	Court on the	Petition to Cori	rect a Birth Certificate. The
				stimony and other evidence. A
				/ital Records of the State of
		The second Flore is at		
Georgia. The	Court having consider	red all of this	, HEREBY ORI	DERS as follows:
That th	ne State of Georgia iss	sue a new Cer	tificate of Live	Birth for
		to replace	e his or her curre	ent Certificate of Live Birth,
				, which shall
				number in the following ways:
be different if	om the current certific	cate of Live 1	min for that hie	number in the following ways.
	Field Number	which curr	ently reads:	
	onum or enumber to.			
	Field Number	_ which curr	ently reads:	
	shall be changed to:_			
	Field Number	_ which curr	ently reads:	
	shall be changed to:_			
	E: 11 N1			
	shan be changed to:_			
	Field Number	which curr	ently reads:	

All other fields for the Certificate of	of Live Birth with State File No
shall remain unchanged.	
This Order entered on	, 20
	JUDGE, SUPEROR COURTS
In re:	
Petitioner.	
Ciril Assis	
Civil Action Case Number	

Your name				
Your address				
			H E	
Date				
	8			
Legal Unit, Vital Records				
2600 Skyland Drive				
Atlanta, GA 30319				
T W				
To Whom It May Concern,				
E-11		6 П П	1_:1_:1_:1_:1	
Enclosed please find a	Secretarion personality and sometimes	ADDITION TO THE PROPERTY OF TH		
File No	ine birth ce	riiiicate contain	s an error(s) a	na must be
amended.				
I have circled the char	nges on the bi	rth certificate th	at I wish to m	iake.
	8			
I am writing to reques	st that your of	fice provide me	with further i	nstructions or
procedures necessary to mak	7)			
be mailed to me at the address		SE		
2				
I have enclosed a cert	ified check or	money order pa	ayable to "Vit	al Records" in the
amount of \$10.00, which is t	he current fee	required to mal	ke the change	on the birth
certificate.				
I can be reached at the	e following pl	none number(s)	with any ques	stions or concerns
	<i>U</i> 1	()	<i>J</i> 1	
	22			
	Sincere	ly,		
				4

General Civil and Domestic Relations Case Filing Information Form

		☐ Superior o	or 🗌 Stat	e Court	of		County		
	For Clerk Use O	nly MM-DD-YYYY			Case Numb	er			
Plaint	iff(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
Plaint	iff's Attorney				Bar Nu	mber	Self	-Represe	ented 🗆
	Civil Ap Contract Garnish General Habeas Injuncti Landlor Medical Product Real Pro	obile Tort peal it ment Tort Corpus on/Mandamu id/Tenant I Malpractice I it Liability Tort operty ning Petition ieneral Civil	Cort		Pos	Maintenar Family Vic Paternity/ Support – Support – Other Dor St-Judgment – Contempt Non-payn medical su Modificatio	n/Divorce/Seponce blence Petition Legitimation IV-D Private (non-Inestic Relation Check One Castle Control Check One Castle Control Check One Castle Control C	se Type upport, nony	ng some or a
	of the same par	ties, subject ma mber	atter, or fa	actual iss	Case Numb	ovide a case nu er	mber for each.		
	I hereby certify to redaction of per						exhibits, satisfy	the requ	irements for
	Is an interpreter	Is an interpreter needed in this case? If so, provide the language(s) required. Language(s) Required							
	Do you or your	client need any	disabilit	y accomr	modations? I	If so, please des	cribe the accon	nmodatio	n request.

General Civil and Domestic Relations Case Disposition Information Form

	☐ Superior or ☐ State Court of						County			
	For Clerk Use O				Case Numb	er				
		MM-DD-Y	YYY							
Plain	tiff(s)				Defendan	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	
	tiff's Attorney ndant's Attorney _					Number		-	esented	
	ner of Disposition k Only One							55		
	Jury Trial Bench/Non-Jury T Non-Trial Disposit Alternative Dis	tion	on							
	Check if any par									
	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?										

SUPERIOR COURT OF EFFINGHAM PARTIES INFORMATION SHEET TO BE FILED WITH COMPLAINT/PETITION

I familif 5 Contact Information.		
Plaintiff's Name:		
Address:		
City:		
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:		