

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW
FORM 12.981(a)(3),
AFFIDAVIT OF NONPATERNITY (03/15)**

When should this form be used?

This form should be used when a stepfather is adopting his wife's minor child and the mother and father of the minor child(ren) were never married and paternity has not been established by a valid acknowledgment or court order. This Affidavit of Nonpaternity may be used instead of a consent form. This Affidavit may be executed before the birth of the minor child. The person signing the affidavit waives notice to all court proceedings after the date it is signed. After signing this affidavit, it may only be withdrawn if the court finds the affidavit was obtained by fraud or duress.

This form should be typed or printed in black ink. This form must be signed before a **notary public** or **deputy clerk** and two witnesses other than the notary or clerk. You should then **file** the original of this form with the **Joint Petition for Stepparent Adoption**, Florida Supreme Court Approved Family Law Form 12.981(b)(1).

IMPORTANT INFORMATION REGARDING E-FILING

The Florida Rules of Judicial Administration now require that petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

Special Notes

Remember--a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE ____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____
Division: _____

IN THE MATTER OF THE ADOPTION OF

_____,
{use name to of the minor child(ren)}Adoptee(s)

AFFIDAVIT OF NONPATERNITY

I, {full legal name} _____, have personal knowledge of the facts stated in this affidavit and certify that the following statements are true:

1. I have been told that {name} _____ has a child. I do not wish to and shall not establish or claim paternity for this child, whose name is _____ and whose date of birth is _____.
2. The child referenced in this affidavit was not conceived or born while the birth mother was married to me. I AM NOT MARRIED TO THE BIRTH MOTHER, nor do I intend to marry the birth mother.
3. The child has not been established to be my child in any court proceeding and I have not adopted this child.
4. I have no interest in assuming the responsibilities of parenthood for this child. I have not acknowledged and will not acknowledge in writing that I am the father of this child or will not institute court proceedings to establish the child as mine.
5. I do not object to any decision or arrangements the birth mother makes regarding this child, including adoption.
6. I understand my right to choose a person who does not have an employment, professional, or personal relationship with the adoption entity or the prospective adoptive parents to be present when this affidavit is executed and to sign it as a witness. The witness I selected is {full legal name} _____.
7. I am executing this affidavit freely and voluntarily and I understand that it can only be withdrawn if the court finds it was executed by fraud or duress.

I WAIVE NOTICE OF ANY AND ALL PROCEEDINGS TO TERMINATE PARENTAL RIGHTS OR FINALIZE AN ADOPTION UNDER CHAPTER 63, FLORIDA STATUTES.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Signature

Printed Name: _____

Address: _____

City, State, Zip: _____

Designated E-mail Address(es): _____

Signature of Witness

Printed Name: _____

Business Address: _____

Home Address: _____

Driver's License or

State ID Card No.: _____

Signature of Witness

Printed Name: _____

Business Address: _____

Home Address: _____

Driver's License or

State ID Card No.: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to or affirmed and signed before me on {date} _____ .

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or deputy clerk.]

Personally known

Produced identification

Type of identification produced _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:

[fill in **all** blanks] This form was prepared for the: {choose only one} () parent or () stepparent

This form was completed with the assistance of:

{name of individual} _____,

{name of business} _____,

{address} _____,

{city} _____, {state} _____, {zip code} _____ {telephone number} _____.