



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR COMMUNITY BASED SERVICES**

**KENTUCKY PUTATIVE FATHER REGISTRY
AFFIDAVIT OF DILIGENT SEARCH**

1. I am responsible for administration of the Putative Father Registry.
2. I have searched the Putative Father Registry pursuant to KRS 199.503 as a result of a request from _____, dated _____.

The request was received by the Putative Father Registry on _____.

Based on a search of the Registry for a mother named _____ and/or a child named _____, the following can be verified:

- A putative father is registered and a copy of the registration is attached to this affidavit.
- More than one putative father is registered and a copy of each registration is attached.
- No putative father is registered.

3. In addition, this search:

- Is a preliminary search as the registration period for any putative father has not expired, or:
- Was completed at least twenty-one (21) days after the birth of the child and serves as the final search of the registry.

Search completed by:

Printed Name

Signature

Date

To be completed by Notary Public

STATE OF _____)
COUNTY OF _____)

Subscribed, sworn to, or affirmed under oath and acknowledged before me, a Notary Public in and for the state and county aforesaid by _____, on this the _____ day of _____, 20____.

Notary Public, State at Large

My Commission Expires: _____