

REQUEST FOR ADOPTION INFORMATION PER ARTICLE 1270 F

In accordance with Louisiana Children's Code, Article 1270 F, I am requesting verification of my adoption, the name of the agency/firm or lawyer which/who facilitated the adoptive placement and the court in which the adoption was finalized.

Complete Section **A** or **B** depending on which situation applies to you:

A. If I am submitting this request with a notarized Adoption Registry Affidavit to register with the Louisiana Adoption Registry, or if I am **already** registered, I need only sign this statement to indicate my wish for the information above.

Signature _____ **Date**

B. If I am submitting this request separately from a Registry application or am not registered, I provide the following information about my adoption so that the adoption record can be located. ***I also provide copy of an official form of identification with my signature on it to prove my identity {such as a driver's license, passport, etc.}***

Full and complete name of Adoptive Father: _____

Full and complete maiden name of Adoptive Mother: _____

My full and complete name at time of adoptive finalization: _____

My date of birth: _____

Place of birth, if known: _____

Phone Number: _____

Complete Mailing Address: _____

Signature _____ **Date**