

County Jackson
Docket Number 2019-000000-DP
Date Order Filed in Court 01/15/2019
Court 1st Circuit Court

NOTICE OF ORDER OF FILIATION

Michigan Department of Health and Human Services
Division for Vital Records and Health Statistics

State File Number _____

Name of Child at Birth (First) JAZMINE	(Middle) JEAN	(Last) JAMES	
Date of Birth (Month, Day, Year) 01-01-2019	Place of Birth (City, Village, Township) JACKSON	(County) JACKSON	(State) MI
Name of Mother (First, Middle, Last) JANE JEAN DOE			
Mother's Name Before First Married	Social Security Number 333-22-0000	Date of Birth 07-04-1999	State of Birth MI

The court has determined that the father of this child is:

Name of Father (First, Middle, Last) JOHN JACK JAMES	Social Security Number 333-44-5555	Date of Birth 11-04-1999	State of Birth MI
Street Address 123 W MAIN ST	City LANSING	State MI	Zip Code 49999

The mother of this child has determined that the child shall be named (please designate full name of the child):

First JAZMINE	Middle JEAN	Last JAMES
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Mail completed form to

Vital Records Changes
PO Box 30721
Lansing MI 48909

Clerk of the Court

Date