AFFIDAVIT IN SUPPORT OF PETITION FOR INSPECTION OF RECORDS OF ADOPTION G.L. c. 210, § 5C	DOCKET NUMBER	Trial Court of Massachusetts Juvenile Court Department

NAME OF ADOPTED PERSON _____

DIVISION _____

ANSWER THE FOLLOWING QUESTIONS

1. The current name of the individual is: _____
2. My relationship to the individual adopted is: _____
3. I am applying to examine the adoption records for the following reasons:

_____

_____

_____

ANSWER NUMBERS 4 THROUGH 11, IF KNOWN BY YOU

4. The birth name of the individual is: _____
5. The birth date of the individual is: _____
6. The birth mother's name is/was: _____
7. The birth father's name is/was: _____
8. The adoptive mother's name is/was: _____
9. The adoptive father's name is/was: _____
10. The date and place of the adoption was: _____
11. The circumstances surrounding the adoption were:

_____

_____

_____

_____

Signed under the pains and penalties of perjury this _____ day of _____ , 20 ____

Petitioner's Signature: _____

Petitioner's Name (printed): _____

Petitioner's Address: _____

_____