

NONCUSTODIAL TEST  
C/O NONCUSTODIAL TEST  
125 MAIN STREET  
BUFFALO , NY 14203

October 10, 2024

Katie Hobbs  
Governor



Angie Rodgers  
Director

RE: CUSTODIAL TEST TEST and NONCUSTODIAL ATLAS TEST  
AZCARES No.: 001428730400

Si usted necesita asistencia con la traducción de este documento, por favor llame a la oficina y pregunte por un representante que hable español.

**Alleged Father Paternity Notice**

CUSTODIAL TEST TEST has sworn under oath that you are the father of the following child(ren):

| <u>Name(s)</u> | <u>Date of Birth</u> |
|----------------|----------------------|
| CHILD TEST     |                      |

The State of Arizona is attempting to establish paternity for the above named child(ren). This is your opportunity to avoid costly litigation by responding voluntarily to this notice. You may respond to these allegations by requesting DNA genetic testing or by voluntary acknowledgment. The Division of Child Support Services (DCSS) has provided documentation for both these choices with this letter. **An Affidavit Acknowledging Paternity and a Father's Agreement to be Bound by Genetic Test Results** is included for each child listed above. You must choose to voluntarily acknowledge or do genetic testing on each child.

The possibility exists that there may or may not be other alleged fathers involved in this case. Please consider this when making your decision. Before completing the enclosed forms read the following instructions carefully.

**Genetic Testing (DNA test)**

If you wish to have a deoxyribonucleic acid (DNA) genetic test to determine paternity, verify that the enclosed Father's Agreement to be Bound by Genetic Test Results is properly prepared with your correct legal name, date of birth, and place of birth. If you find errors, please correct these items and initial by each correction you make. Do not change any information about the mother or child(ren). Complete this form in **BLACK** ink only.

Sign and date the **Agreement to be Bound by Genetic Testing**, one for each child, in front of a witness. The witness must be at least eighteen (18) years old and cannot be related to you. A genetic testing appointment will be scheduled for you and there will be no cost to you at the time of your appointment. If you are found to be the father through genetic testing, the State of Arizona will require reimbursement of \$85.00 per person tested for the cost of the DNA testing.



## **Affidavit Acknowledging Paternity (Voluntary Acknowledgement)**

If you choose to sign the Affidavit Acknowledging Paternity, you are choosing to voluntarily admit that you are the biological father of the above named child(ren) and giving up the right to have genetic testing performed. **This document must be signed in front of a notary public.** An **Affidavit Acknowledging Paternity** must be signed for each child. You may admit paternity for one child and request genetic testing for another.

You will notice that your social security number has been removed from the Affidavit(s). This has been done for your protection because this document has left the DCSS office. You must **handwrite** your social security number and place your initials by it in the space provided. Once you have hand written your social security number on every Affidavit Acknowledging Paternity (one for each child) and placed your initials above it, you must have it notarized and returned to DCSS.

If you have no social security number, you must put **NO SSN** and initials in the space provided for your social security number. This must be done so that we know you have not overlooked the blank space provided for your social security number.

After the mother has signed the Affidavit of Acknowledgement of Paternity, the document will be filed with the Office of Vital Records (OVR) through DCSS for all child(ren) born in Arizona. Your name will be added to the child's birth certificate. The administrative process has the same force and effect as a court order. For any child(ren) born in another state, DCSS will obtain an Order of Paternity through the judicial process.

It is important that you understand the process of establishing paternity and that once you have been established as the legal father, you will be responsible for child support. Establishing paternity also provides you with a basis for decisions regarding custody and visitation.

You must also sign and date the **Paternity Informed Consent Notice**. Please read it carefully because it explains the different methods used in establishing paternity. The notice also explains the legal importance, rights and responsibilities that come with establishing paternity. It is important that you understand that once you are established as the legal father, you will be responsible for child support. Establishing paternity also provides you with a basis for decisions regarding custody and visitation.

### **Personal Data Sheet**

Please complete the **Personal Data Sheet**, regardless of your selection. If you are aware of any additional information that might affect this case, please provide us with detailed information on your **Personal Data Sheet**.

If you do not respond to this letter by November 11, 2024 the attorneys who represent DCSS will proceed to file a paternity lawsuit against you and the court may order you to pay all costs incurred in establishing paternity and child support.

If you have any questions about this notice, you may contact DCSS Customer Service at (602) 252-4045 (within Maricopa County), Nationwide toll free at 1-800-882-4151, or TTY/TDD Services: 7-1-1. You may also contact us by e-mail at the DCSS web site at [www.azdes.gov/dcss](http://www.azdes.gov/dcss).

Equal Opportunity Employer / Program • Auxiliary aids and services are available upon request to individuals with disabilities • To request this document in alternative format or for further information about this policy, contact the Division of Child Support Services at (602) 252-4045; TTY/TDD Services: 7-1-1 • Disponible en español en línea o en la oficina local.

