

AFFIDAVIT FOR CURRENT YEAR CORRECTIONS

STATE OF GEORGIA

STATE FILE NUMBER _____

I, _____, THE MOTHER OF

_____, BORN ON _____
(Name Shown on Certificate)

AM REQUESTING THAT MY CHILD'S NAME BE CHANGED FROM

_____ TO _____

EFFECTIVE _____.

Signature of Affiant (Mother)

SWORN TO BEFORE ME THIS _____ DAY OF _____ 20____

Notary Public's Signature (SEAL)

MY COMMISSION EXPIRES: _____ 20____

IDENTIFICATION PRESENTED BY MOTHER:
