

Registry Number: _____

Embassy of the Republic of the Philippines) S. S.
Phnom Penh, Kingdom of Cambodia)

A F F I D A V I T OF A D M I S S I O N OF P A T E R N I T Y

I, _____, _____, _____, _____
(Affiant's Name) (Citizenship) (Civil Status) (Age)
years old, a resident of _____, after having been
(Complete Address)
duly sworn to in accordance with law do hereby declare that;

1. I am the biological father of the child _____ who
was born on _____ at _____ ;
(Date of Birth) (City/Municipality) (Country)
2. That at the time of birth of the said child, I am not married to his/her mother, _____
_____ ;
3. That I hereby acknowledge my paternity/filiation to the child _____ ;
4. That I am executing this affidavit to attest the truth of the foregoing facts and for whatever legal purpose
it may serve.

In Witness Whereof, I sign these presents on _____ day of _____ 20__ in Phnom Penh,
Cambodia.

Signature over Printed Name of Affiant

SUBSCRIBED AND SWORN to before me this ____ day of _____, 20__, in Phnom Penh,
Cambodia.

**Signature over Printed Name of the
Administering Officer**

Service No. _____
Doc. No. _____
Book No. _____
Fee Paid _____
O.R. No. _____