



Adoption Disclosure Statement

COURT CASE NUMBER: _____

ADOPTION NUMBER: _____

In the matter of adoption of _____
Adoptee(s) Name

by _____
Petitioner(s) Name

1. We report the following fees and charges, or other considerations in connection with this adoption.

	ESTIMATED TOTAL	PAID TO:
A. Court Filing Fees:	\$ _____	_____
B. Petitioner's Attorney Fees: (Total)	_____	_____
C. Adoption Agency Fees / Contribution:	_____	_____
D. Medical Costs Child:	_____	_____
E: Birth Mother's Expenses		
Attorney Fee:	_____	_____
Counseling Fees:	_____	_____
Room and Board:	_____	_____
Travel:	_____	_____
Other:	_____	_____
F. Vital Statistics Fees:	_____	_____
G. Other (Specify Below):	_____	_____
ESTIMATED TOTAL: \$	_____	_____

2. We certify that no other fees, costs, or expenses have been paid or exchanged or shall be paid or exchanged by any party in this adoption proceeding.

3. We declare that this disclosure statement has been examined by me/us and that its contents are true to the best of my/our information, knowledge, and belief.

Attorney Signature Bar No.

Petitioner Signature Date

Address

Petitioner Signature Date

Date

THIS FORM IS AVAILABLE IN ALTERNATE FORMAT UPON REQUEST