

ORDER DETERMINING PARENTAGE

Using This Form

1. Copies
 - a. Original - to court. See "Using This Form", 4(a).
 - b. First copy - Department of Vital Records. This copy must be certified.
 - c. Additional copies to each party in the case and, if copy of order is sent to Division of Child Support Enforcement (DSCE) to DCSE.
2. Prepared by clerk, signed by judge.
3. Attachments - none.
4. Preparation details.
 - a. If DCSE is involved in the case, add DCSE I.D.
 - b. Data Elements 3, 4, 5 should conform to the style of the case as shown on the petition.
 - c. Include first name, middle name, last name, suffixes (Sr., Jr., etc.) and nicknames. It should have been alleged in Form DC-631, Parentage Supplement to Petition.
 - d. This information is required to be in all parentage orders, Va. Code § 20-49.8. It may be alleged in Form DC-641, Parentage Supplement to Petition.
 - e. This order should be entered whenever parentage is issue in a case and when either
 - the parents of the child are not married and parentage has not been judicially determined, or
 - the parents are married and parentage is disputed.
 - f. If Data Elements No. 19 is checked and a support order is to be entered in connection with this order, then include the reimbursement costs in such order of support rather than in Data Element No. 20 of this order.
 - g. The reverse of this form need only be completed on the Department of Vital Records copy.

ORDER DETERMINING PARENTAGE

Data Elements, *Front*

1. Court case number. If division of Child Support Enforcement (DCSE) is involved, add DCSE I.D. number
2. Court jurisdiction.
3. Name of Petitioner or the Commonwealth. See "Using This Form," 4(b).
4. Cross out the part of the case style that is inapplicable. See "Using This Form," 4(b).
5. Name of respondent or the subject of the petition. "See Using This Form," 4(b).
6. Complete name of alleged father. See "Using This Form," 4(c).
7. Social security number of the alleged father.
8. Race or color of alleged father.
9. Date of birth of alleged father.
10. Place of birth of alleged father.
11. Check this box if any of the children were found to be children of the alleged father and provide descriptive data for each child for whom the alleged father was found to be the father.
12. Check this box if any of the children were not found to be children of the alleged father and provide descriptive data for each child for whom the alleged father was found not to be the father.
13. Complete name of mother. See Using This Form, 4(c).
14. Social security number of the mother.
15. Complete maiden name of mother. See Using This Form, 4(c).
16. Check the applicable block.
17. Check the applicable block.
18. Name and mailing address of person who can give additional information to complete a new birth record. See "Using This Form," 4(d).
19. Check this box if applicable.
20. If Data Element No. 19 is checked and no other order provides for reimbursement, check this box and insert the amount awarded. See "Using This Form," 4(f).
21. Date of entry of order.
22. Signature of judge.
23. Check the applicable box to indicate to whom the copy should be provided.

ORDER DETERMINING PARENTAGE

Commonwealth of Virginia Va. Code §20-49.8

Case No. 1

☐ Circuit Court

☐ Juvenile and Domestic Relations District Court

2
3 4 5
v./In re

Upon hearing the evidence, the Court finds that:

1. 6, social security number 7
FULL NAME (First, Middle Last)

who is 8 and was born on 9 in 10
RACE OR COLOR DATE STATE OR FOREIGN COUNTRY

☐ a. is the father of the following children:

Full Name
(First, Middle Last)

Sex

Birth Place

Date of Birth

Social Security Number

(1)

(2)

(3) 11

(4)

☐ b. is not the father of the following children:

Full Name
(First, Middle Last)

Sex

Birth Place

Date of Birth

Social Security Number

(1)

(2)

(3) 12

(4)

2. 13, social security number 14
FULL NAME

is the mother of the above-listed children, and her maiden name is: 15

16 3. ☐ yes ☐ no The children were made parties to the proceeding.

17 4. ☐ yes ☐ no The children were represented by a guardian ad litem or counsel.

5. 18
is the name and address of an informant who can furnish the information necessary to complete a new birth record.

(Complete the following if applicable)

19 6. ☐ The Court finds that the Virginia Department of Social Services is entitled to reimbursement for attorney's fees and other costs from the father.

20 7. ☐ There being no other order providing for reimbursement by the father, the Court orders the father to pay to the Virginia Department of Social Services the sum of \$

21
DATE

22
JUDGE

Clerk's Office: Please ensure reverse of form is completed.

Litigants: Please see reverse for important birth certificate information.

23 ☐ VITAL RECORDS ☐ DSCE ☐ PETITIONER ☐ RESPONDENT ☐ OTHER

ORDER DETERMINING PARENTAGE

Data Elements - *Reverse*

1. Insert the court name and check appropriate box.
2. Data of certification.
3. Signature of clerk or deputy clerk certifying that this is an authentic copy.

ORDER DETERMINING PARENTAGE

IMPORTANT BIRTH CERTIFICATE INFORMATION FOR PARENT/LEGAL GUARDIAN

To add the father's name to your child's birth certificate, it is your responsibility to send a request to the Office of Vital Records. Please contact the Office of Vital Records for information on how to obtain a new birth certificate.

OFFICE OF VITAL RECORDS
P.O. Box 1000
Richmond, VA 23218-1000
(804) 662-6200

FOR COURT USE ONLY

- ☐ Circuit Court
- 1** ☐ Juvenile and Domestic Relations District Court

I, the undersigned clerk or deputy clerk of the above-named court, authenticate pursuant to Va. Code § 8.01-391 (C) on this date that the document to which this authentication is affixed is a true copy of a record in the above-named court, made in the performance of my official duties.

2

Date

3

Clerk/Deputy Clerk