

ADULT-ADOPTION CHECKLIST

ADULT ADOPTIVE CHILD (Adoptee):

Full Name: _____

Maiden/Birth Name (if different): _____

Date of Birth: _____ Place of Birth: _____

Social Security No.: _____

Current Address: _____

Marital Status: _____ Date/Place of Marriage: _____

Occupation: _____

Am. Indian/Ak. Native: Yes ___ No ___

If Yes, what Tribe/Band: _____

Lived in Oregon 6 Months or More: Yes ___ No ___

Addresses and Duration Adoptee Lived for past five (5) years: _____

Adoptive (Adoptee) Name Change: Yes ___ No ___

If yes, **New Name**: _____

ADOPTIVE PARENT(S):

Full Name(s): _____

Maiden Name: _____

Birth Date(s): _____

Place of Birth: _____

Social Security Number(s): _____

Marital Status/Date & Location: _____

Current Address: _____

Telephone No.: _____

Lived in Oregon 6 Months or More: Yes ___ No ___

Occupation(s): _____

BIRTH PARENT (IF RETAINING STATUS):

Full Name: _____

Maiden Name: _____

Date of Birth: _____ Place of Birth: _____

Social Security No.: _____

Current Address: _____

Telephone No.: _____

Lived in Oregon 6 Months or More: Yes ___ No ___

COSTS:

Circuit Court Filing Fee for Adoptions: \$265.00

Amended Birth Certificate after Adoption: \$65.00*

*This is the cost for an **Oregon** born Birth Certificate. Prices vary by state. Please be advised that we have no control over the time frame to obtain the amended Birth Certificate. Each state is different and each Department of Vital Records works differently and can take anywhere from 6 weeks - 9 months.

FLAT FEES FOR ADULT ADOPTIONS:

No other birth/legal parent to Consent: \$1,000.00

CLIENT AGREEMENT

Payment of your account is due in full within thirty (30) days of billing. If an amount is not paid within sixty (60) days of the billing date, we reserve the right to terminate representation of you without notice, unless acceptable, written payment arrangements are made before the 60th day, and are strictly abided by. In such a situation, Client agrees that the matter can be turned over to collections.

NOTE: If our work is complete and you have not come in to sign documents within a thirty (30) day period, a bill for Attorney fees will be sent as though the matter has been completed.

SIGNING BELOW MEANS YOU HAVE READ, FULLY UNDERSTOOD AND AGREED TO THE ABOVE.

DATE

SIGNATURE

DATE

SIGNATURE

DATE

SIGNATURE