## COURT OF COMMON PLEAS OF MONTGOMERY COUNTY ORPHANS' COURT DIVISION

## ADOPTION SEARCH REQUEST FORM

Please provide as much of the following information as possible. The Court will notify you if this adoption DID or DID NOT occur in Montgomery County. If the adoption DID occur in Montgomery County, the Court will inform you of the next step required to obtain non-identifying or identifying information.

## PRINT or TYPE: All information must be legible.

Name of Person making Request:		
Current Address:		
Phone Number:		
Your Relationship to Adoptee:		
Adoptee's Name before Adoption (birth	name):	
Adoptee's Name after Adoption:		
Adoptee's Date of Birth:	Adoptee's Place of Birth:	_
Name(s) of Birth Parent(s):		
Name(s) of Adopting Parent(s):		
Date of Adoption:		
Any other information that will assist in	this search:	
What are you hoping to obtain with this		
Non-Identifying Information Other:	Identifying Information	Certified Copy of Adoption Decree
By my signature below, I state I am the person whom I repre		remotion within this form is complete and accurate to
by my signature octow, I state I am the person whom I repre- tive best of my knowledge and made subject to the penalties misstating my identity or assuming the identity of another penalty Pa. C.S. §4120 or other sections of the Pennsylvania Crimes	of 18 Pa.C.S. §4904 relating to unsworn falsiferson may subject me to misdemeanor or felor	ication to authorities. In addition, I acknowledge that
Signature of person making request	Date	
Datum to. Ashley Vadet Count Amainte	4 A.41 4 D	

Return to: Ashley Kodet, Court Appointed Authorized Representative

Montgomery County Orphans' Court

P.O. Box 311

Norristown, PA 19404-0311 AKodet@montcopa.org