

STATE OF HAWAI'I FAMILY COURT SECOND CIRCUIT	Request Regarding Confidential Adoption Records of the Family Court (Act 80 of 2016)	CASE NUMBER FC-A No. _____
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13. **APPLICANT DECLARES UNDER PENALTY OF PERJURY THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF.**

14. _____
Date Applicant's Signature

Print Applicant's complete name: _____

Document Title: Request Regarding Confidential Adoption Records of the Family Court (Act 80 of 2016)

Document Date: _____ No. of Pages: 2 was subscribed and sworn to me on _____ in the Second Circuit, State of Hawai'i by:

_____, who
 (Print name of person who signed Request)
 personally appeared before me and to me known to be the person described in and who executed the foregoing document and acknowledge that s/he executed the same as his/her free act and deed.

 (Signature of Notary Public)

 (Print Name of Notary Public)

Date: _____

My commission expires: _____

Affix Seal

FOR FAMILY COURT USE ONLY: (if Request is signed in front of court staff)

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 Picture ID verified Clerk's initials: _____

REQUEST IS: APPROVED DENIED

 Judge, Family Court of the Second Circuit
 Print Name of Judge: _____

Americans with Disabilities Act Notice



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation: Call (808) 244-2855 FAX(808) 244-2932 OR Send an e-mail to: adarequest@courts.hawaii.gov. The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.