

(1) THE FULL NAME AND THE PLACE AND DATE OF BIRTH OF THE CHILD;

(2) THE FULL NAME OF THE ATTESTING NATURAL FATHER OF THE CHILD;

(3) THE FULL NAME OF THE ATTESTING NATURAL MOTHER OF THE CHILD;

(4) THE SIGNATURES OF THE NATURAL FATHER AND THE NATURAL MOTHER OF THE CHILD ATTESTING, UNDER PENALTY OF PERJURY, THAT THE INFORMATION PROVIDED ON THE AFFIDAVIT IS TRUE AND CORRECT;

(5) A STATEMENT BY THE MOTHER CONSENTING TO THE ASSERTION OF PATERNITY AND THAT HER COSIGNATORY IS THE ONLY POSSIBLE FATHER;

(6) A STATEMENT BY THE FATHER THAT HE IS THE NATURAL FATHER OF THE CHILD;

(7) A STATEMENT THAT THE AFFIDAVIT IS A LEGAL DOCUMENT AND AN EXPLANATION OF THE IMPLICATIONS OF SIGNING THE AFFIDAVIT, INCLUDING PARENTAL RIGHTS AND RESPONSIBILITIES; AND

(8) THE SOCIAL SECURITY NUMBERS OF BOTH PARENTS.

(D) THE ADMINISTRATION SHALL PREPARE WRITTEN INFORMATION TO BE FURNISHED TO UNMARRIED MOTHERS UNDER § 4-208 OF THE HEALTH - GENERAL ARTICLE CONCERNING THE BENEFITS OF HAVING THE PATERNITY OF THEIR CHILDREN ESTABLISHED, INCLUDING THE AVAILABILITY OF CHILD SUPPORT ENFORCEMENT SERVICES.

(E) THE DEPARTMENT SHALL MAKE THE STANDARDIZED AFFIDAVIT FORMS AVAILABLE TO ALL HOSPITALS IN THE STATE.

5-1028.1.

(A) AN UNMARRIED FATHER AND MOTHER SHALL BE PROVIDED AN OPPORTUNITY TO EXECUTE AN AFFIDAVIT OF PARENTAGE IN THE MANNER PROVIDED UNDER § 4-208 OF THE HEALTH - GENERAL ARTICLE.

(B) THE AFFIDAVIT SHALL BE COMPLETED ON A STANDARDIZED FORM DEVELOPED BY THE DEPARTMENT.

(C) THE COMPLETED AFFIDAVIT OF PARENTAGE FORM SHALL CONTAIN:

(1) IN TEN POINT BOLD FACE TYPE A STATEMENT THAT THE AFFIDAVIT IS A LEGAL DOCUMENT AND CONSTITUTES A REBUTTABLE PRESUMPTION OF PARENTAGE IN A PATERNITY PROCEEDING;

(2) THE FULL NAME AND THE PLACE AND DATE OF BIRTH OF THE CHILD;

(3) THE FULL NAME OF THE ATTESTING FATHER OF THE CHILD;

(4) THE FULL NAME OF THE ATTESTING MOTHER OF THE CHILD;