IN THE COURT OF COMMON PLEAS OF LACKAWANNA COUNTY ORPHANS' COURT DIVISION

REPORT OF INTERMEDIARY 12 Pa. C.S.A. 2101 ct seq. as Amended August 22, 1982 P.L.174

IN RE: Adoption of _____

File No. A-____, 20____

(Instructions)

The report of the intermediary shall have attached to it the following exhibits:

- a. Original birth certificate or certification of registration of birth of child
- b. All consents to adoption required by Section 411 (3), (4), (5) of the Adoption Act
- c. All certified copy of any Decree of termination made by the Court other than the Court in which the Petition for adoption will be filed.

The intermediary shall notify in writing the adopting parent(s) of the fact that this report has been filed at that date hereof.

TO THE HONORABLE, THE JUDGES OF SAID COURT:

1. This report of the undersigned intermediary who or which arranged the adoption placement of a child under the age of eighteen years, respectfully represents:

NAME:			

OCCUPATION_____

ADDRESS _____

2. That the child who is the subject of this report is:

NAME: _____

SEX_____ RACE_____

RELIGIOUSAFFILIATION	AGE	
DATE OF BIRTHBIRTHPLAC	THPLACE	
	(CITY/STATE)	
 The said child was placed with the following on		
NAME:		
ADDRESS:		
4. That the following information is submitted	about the parents of such child:	
FATHER INFORMATION:		
Name:		
Color/Race	Date of Birth	
Age: Occupation:	_Religious affiliation:	
Address:		
County:	_State	
Marital status	_	
MOTHER INFORMATION:		
Name:		
Color/Race	Date of Birth	
Age: Occupation:	_Religious affiliation:	
Address:		
County:		
Marital status		

5.	The Decree(s) of termination of parental rights or parental rights and duties with to the child has been entered as follows: (Court, date, number etc.)	h respect
6.	That the following consents to the adoption of	equired by
an	hat the fees or expenses paid or to be paid to or received by the intermediary or to ny other persons to the knowledge of the intermediary by reason of the adoption pre- re as follows:	
	hat a full description and statement of the value of all property owned or possesse ild is as follow:	d by the
	certify that medical information was obtained or the reason that said information was obtained is as follows:	vas not

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10. That no provision of any act regulating the importation of dependent, delinquent or defective children has been violated with respect to the placement of the child.

(Name of Intermediary submitting report)

(Signature of Intermediary submitting the report)

COMMONWEALTH OF PENNSYLVANIA COUNTY OF LACKAWANNA

I, ______, being duly sworn according to law, depose(s) and say(s) that the facts contained in the forgoing Report are true and correct to the best of his (her,their) knowledge, information and belief.

Sworn to and subscribed before me

This ______ day of ______, 20_____

(Signature / Seal of Notary)