

AFFIDAVIT OF HOME BIRTH
(VR-18)

PURPOSE

To establish actual existence of child named on Certificate of Live Birth (VR-1) when birth was not attended by licensed physician, nurse practitioner, or licensed/apprenticed midwife. Note: If an attending Medical Doctor (M.D.), Doctor of Osteopath (D.O.), Certified Nurse Midwife (C.N.M.), Licensed Midwife, or apprentice serving under the direction of a C.N.M. or Licensed Midwife is present at the home birth and signs Block 9 of the Certificate of Live Birth, a VR-18 is not needed. If one of those is not present at the home birth, a VR-18 must be completed.

EXPLANATIONS AND DEFINITIONS

<u>Name of Child:</u>	Name of newborn.
<u>Month, Day, Year:</u>	Birthdate of newborn.
<u>Town, County:</u>	Town and county in which child was born.
<u>Name of Father:</u>	Self-explanatory.
<u>Full Maiden Name of Mother:</u>	Self-explanatory.
<u>Signature:</u>	Check appropriate box and sign. <u>Note</u> : Someone other than the one who signed Blocks 9 and 12 on the Certificate of Live Birth must sign here. For example, if the mother or father signed on Block 9 of the VR-1, he/she <u>CANNOT</u> sign here. A different parent, or someone who knew of the birth, can sign here.
<u>Signature Subscribed and ...:</u>	Date of notarization.
<u>Notarizing Official:</u>	Signature of notarizing official.
<u>Date Commission Expires:</u>	Self-explanatory.

MECHANICS AND FILING

Information contained in the Affidavit of Home Birth (VR-18) must agree with information in the Certificate of Live Birth (VR-1).

Complete the Affidavit of Home Birth (VR-18), attach to the Certificate of Live Birth (VR-1), and mail to the Central Office at the address provided.

ARKANSAS DEPARTMENT OF HEALTH
Vital Records
Affidavit of Home Birth

This affidavit must be completed for each home birth recorded **without** the attendance of a licensed physician, nurse practitioner or licensed midwife. The certifier who signs the Certificate of Live Birth form on line 12 cannot sign the Affidavit of Home Birth Form. The affidavit may be signed by another person who has actual knowledge of the facts of the birth. **This affidavit must be attached to the Birth Certificate.**

	born
Name of Child	Month Day Year
in	to
City or Town County	Name of Father
and	
Full Maiden Name of Mother	Signature Subscribed and Sworn to Before Me
I, the undersigned, know the facts of the birth because (check one of the following):	This day of 20
<input type="checkbox"/> I was present at the birth.	Seal
<input type="checkbox"/> I learned of the birth immediately after it occurred.	
/ /	/ /
Date Signature	Notarizing Official Date Commission Expires

HOME BIRTH FILING BEFORE ONE YEAR OF AGE

Rules and Regulations Pertaining to Vital Records 4.0 outlines evidence required to process an unattended home birth that is filed **before** the first birthday.

Processing and filing can only be done by the State Office of Vital Records.

Documents required for filing a home birth (there is no waiver) are as follows:

1. A State or Federal photo I.D. for the birth mother.
2. A completed Certificate of Live Birth form (VR-1). Revised 1/2014
3. A signed, notarized Affidavit of Home Birth (VR-18) R 7/10

In addition, **one of each** of the following is also required:

- a. **Evidence of pregnancy** which can be accomplished through a prenatal medical record from a physician, prenatal records from the Local Health Units, or records of home visit by a public health nurse or other health care provider. This would include a state-licensed Midwife. Professionally camera dated photos of the mother **within** two weeks of the birth would be acceptable (examples: professional photographer; photo next to event that **clearly** shows date such as current newspaper, ultrasound with date and name, etc.).
- b. **Evidence of mother's presence in Arkansas** on the dates before and after the birth. Examples include: Identification card (in addition to I.D. required above), which includes the mother's **current** Arkansas residence on the face of the license/card, rent receipts, any type of utility, telephone, or other bills that include the mother's name and address showing presence in the state. Within two weeks **before** the birth and **after** would be acceptable. Credit card or check purchases (both sides of copies of cancelled checks), signed by the mother at businesses in the state of Arkansas both prior and after the birth of the child.

**If the mother is not a resident of the state of Arkansas, evidence must be presented to the State Registrar that is clear and convincing to file the home birth.

RV 08/11

CHECK LIST FOR UNASSISTED BIRTHS

- 1. Certificate of Live Birth completed correctly with certifier's name on Lines 12a, 12b and 13.**
- 2. Affidavit of Home Birth signed in the presence of a notary public. Someone other than the person that delivered the infant.**
- 3. Current State or Federal photo ID for mother**
- 4. Evidence of pregnancy: progress report notes from doctor (not a letter of testimony), prenatal records from Local Health Unit. This includes home visit by a public health nurse or a state license Midwife.

A) Camera dated photos of the mother immediately before or after the birth. If camera is not able to make dates, a current newspaper held in front of the mother showing the name of paper and current date of paper. An ultrasound picture showing date ultrasound taken and mother's name on picture. (All documents returned to mother.)**
- 5. Evidence of mother's residence in the state before the birth and after the birth with her name on the address. Copy of canceled checks (front and back) written by mother to local businesses in the State.**
- 6. Ask for a copy of child's immunization record, or a bill relating to child's visit to doctor after birth. (To show child does exist.)**