

South Carolina Department of Social Services
RESPONSIBLE FATHER REGISTRY
REVOCATION OF CLAIM OF PATERNITY

A registrant on the Responsible Father Registry may at any time revoke a claim of paternity by filing a revocation with the South Carolina Department of Social Services in the manner prescribed by the Department of Social Services. The filing of such a revocation of claim of paternity makes the prior filed claim of paternity null and void.

Request for Revocation of Claim of Paternity

Personal Information of Registrant Father

First Name: _____

Middle Name: _____

Last Name: _____

Residential Address: _____
Street City State Zip Code

Mailing Address: (If different from residential address)

P.O. Box/Street City State Zip Code

Date of Birth: _____

First name of mother of child for which paternity was claimed: _____

Mother's Middle Name: _____

Mother's Last Name: _____

Residential address of mother of child:

P.O. Box/Street City State Zip Code

Date of birth of the mother of the child: _____
Month Day Year

Name of child for which paternity was claimed: _____

Date of birth of the child for which paternity was claimed: _____

Date, county and state of conception of the child for which paternity was claimed:

Month Day Year County State

I understand when I sign and submit this Revocation of Claim of Paternity, my claim of paternity as to the child identified on this form becomes null and void.

Signed: _____

Date: _____

Mail this form to:

South Carolina Department of Social Services, Responsible Father Registry
P.O. Box 1520
Columbia, South Carolina 29202