STATE OF MONTANA			
COUNTY OF			
I,	born on		, hereby serve
Father's Name notice that I intend to claim paternity of the	he child or chil	Date Idren currently expec	eted to be born to
	, who re	esides at	,
Mother's Maiden Name	Street address		
, Montana.	Expected date	e of delivery:	
City	C: t		
	Signature:_		
	Address:		
		Street	
	City	State	Zip
Subscribed and sworn to before me	e this day	y of	, 20
(NOTARY SEAL)	Notary Public for the State of Montana		
	Printed Signature Residing at:		
	My Commission expires:		
If this is being filed in response to Notice	Of Intent To I	Release by the mothe	r, please state:
Name of Court:			
Court File Number:		-	