STATE OF MISSOURI)
)ss
COUNTY OF ST. LOUIS)

IN THE FAMILY COURT OF ST. LOUIS COUNTY, MISSOURI

In the Matter of:

_____ No. _____

_____
Petitioner(s)

AFFIDAVIT

I/We, _____ and _____, petitioner(s) in the above-entitled Adoption cause, being first duly sworn upon our oaths, state that the following is a just, true, and full accounting of any money, anything of value or other consideration paid or to be paid or transferred or transferred by or on behalf of us, or either of us, individually or jointly, in connection with the placement or adoption in this cause.

*All payments or transfers made or to be made or consideration given or promised by or on behalf of petitioners in connection with the placement or adoption are:

1. Agency Fees (breakdown of costs assessed by the agency, e.g., foster care, etc.):

   _____

2. Hospital and Other Medical Expenses:_____

3. Court Costs: _____

4. Fees for Legal Services: _____

5. Midwife or Physician Expenses: _____

6. Other:

_____ _____
Petitioner Petitioner

Subscribed and sworn to before me this _____ day of _____, _____.

_____ My commission expires: _____.
Notary Public

***See RSMo. 568.175 for permitted expenditures. Be sure to complete every line.**