Denial of Release for Birth Parent

Section 3107.46 of the Ohio Revised Code states a birth parent, who did not check the "no" space provided on the form completed as part of the adoption process or birth parent, who signed an authorization of release form, may rescind that form by filing a denial of release form. Two items of identification, such as motor vehicle driver's or commercial driver's license identification card, marriage application, social security card, credit card, military identification card, or employee identification card, must be submitted with the denial of release.

Information as reported on adopted person's original birth certificate

Child's name at birth: (First, Middle, Last)			
Date at birth	Mother's full maiden name		
Place of birth City	County	State	ZIP

I do not authorize the release of identifying information about me, from the adoption file maintained by the Ohio Department of Health to the adoptive parent when the adoptee is at least eighteen, but younger then the age of twenty-one and to the adoptee, when he or she is age twenty-one or older. I understand I may change my mind at any time and as many times as I desire regarding the release of identifying information by signing, dating and filing a denial of release or authorization of release prescribed and provided by the Department of Health and by providing the Department of Health with two forms of identification.

Signature of birth parents			Date
Street address	City	State	ZIP

The complete denial of release for birth parent should be mailed to Ohio Department of Health, Vital Statistics, 35 East Chestnut Street, 6th Floor, P.O. Box 118, Columbus, Ohio 43216-0118. Ohio law requires that the birth parent receive a copy of the completed form.