

## Voluntary Acknowledgment of Paternity Program (TN VAoP) Brochure Request Form

*Enter information by clicking in the table area to the right*

	<i>Date of Request</i>	
TITLE OF PATERNITY BROCHURE	ENGLISH Qty - 50 per packet Number of Packets Requested	SPANISH Qty - 25 per packet Number of Packets Requested
Establishing Paternity		
Paternity Guide for Dads		
Paternity Guide for Moms		

### MAILING INFORMATION

<b>NAME</b>	
<b>AGENCY NAME</b>	
<b>MAILING ADDRESS</b>	
<b>CITY, STATE, ZIP</b>	

- EMAIL COMPLETED REQUEST TO: [ChildSupportPaternity.VAoP.DHS@tn.gov](mailto:ChildSupportPaternity.VAoP.DHS@tn.gov)
- TO VIEW PATERNITY BROCHURES: [tn.gov/humanservices/TN\\_VAoP\\_Program](http://tn.gov/humanservices/TN_VAoP_Program)

### CONTACT INFORMATION

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[tn.gov/humanservices](http://tn.gov/humanservices)

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