

www.TheAdoptionSearchConnection.com

Email: TheAdoptionSearchConnection@gmail.com

Full Search Agreement - Missouri

(Please print)

Name: _____ Address: _____

Birthdate: _____ City/State/Zip: _____

Phone #: _____ Email Address: _____

County/State Court that handled adoption _____

Adoption agency handling the adoption (if known) _____

Adoptive Parent's Names _____

Court Adoption file # (if known) _____ Retainer fee: \$350

I am interested in having a search conducted for my biological parents. I have been informed of the Missouri law pertaining to adoption records. As I know the identity of my birth parents, no court information or authorization is being requested.

I am willing to abide by the wishes of my biological parents, if found, regarding the amount of contact. I am aware of the retainer fee (\$350) and that I will be notified, in advance, if the search will require additional fees. I will then have the choice of continuing the search or closing it. The Searcher will perform the search, attempt to make contact with the birth parents or their family if they are deceased and will help to facilitate the first contact between myself and my biological family, upon their consent.

Signature of Adoptee

Date

(Notary Signature Required)

STATE OF _____)

COUNTY OF _____)

On this ____ day of _____, 20____, before me, the undersigned Notary Public, personally appeared _____ known to me to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purpose therein contained.

In witness whereof, I have hereunto set my hand and official seal.

Notary Public

My commission expires: