

STATE OF MAINE

DISTRICT COURT

Location _____

Docket No. _____

In re the Adoption of:

(Name of Minor Adoptee)

**REPORT OF
DISBURSEMENTS
18-A M.R.S. § 9-306(a)**

Petitioner(s) do/does certify under oath that the following disbursements and expenses have been or will be paid by or on behalf of me/us in connection with this adoption, and that this report is a full accounting of all disbursements and payments made in connection with this adoption, including all payments in cash or transfers of anything of value.

For each service provided, include the following: A) name and address of payee; B) amount or value that payee received; and, C) date of payment or transfer.

Legal services provided to legal parent 1 in connection with surrender and release, consent, or adoption process. _____

Legal services provided to legal parent 2 in connection with surrender and release, consent, or adoption process. _____

Counseling services provided to legal parent 1 in connection with surrender and release, consent, or adoption process. _____

Counseling services provided to legal parent 2 in connection with surrender and release, consent, or adoption process. _____

Prenatal, birthing, and other related medical expenses for the birth mother. _____

Transportation expenses associated with any of the above services. _____

Foster care expenses for the child. _____

Living expenses for the birth mother. _____

Other (Also include here the name and address of any other persons or entities who

participated in any way in the handling of funds associated with this adoption, either directly or indirectly.)

PLEASE NOTE: Report of disbursements is not required when one of the petitioners is a blood relative.

Dated: _____
_____ Petitioner

Dated: _____
_____ Petitioner

STATE OF MAINE

_____ COUNTY

Personally appeared the above-named _____, and made oath that the foregoing statements are true.

Before me,

Date: _____
_____ Attorney at Law/Notary Public/Deputy Clerk

_____ COUNTY

Personally appeared the above-named _____, and made oath that the foregoing statements are true.

Before me,

Date: _____
_____ Attorney at Law/Notary Public/Deputy Clerk