



## 97TH GENERAL ASSEMBLY

### State of Illinois

### 2011 and 2012

### HB1255

Introduced 02/08/11, by Rep. Sara Feigenholtz

#### SYNOPSIS AS INTRODUCED:

410 ILCS 535/17	from Ch. 111 1/2, par. 73-17
750 ILCS 50/18.06	
750 ILCS 50/18.1	from Ch. 40, par. 1522.1
750 ILCS 50/18.1a	
750 ILCS 50/18.1b	
750 ILCS 50/18.2	from Ch. 40, par. 1522.2
750 ILCS 50/18.3a	from Ch. 40, par. 1522.3a
750 ILCS 50/18.6	from Ch. 40, par. 1522.6

Amends the Vital Records Act. Provides that if a new birth certificate is issued subsequent to an adoption, the original certificate is not subject to inspection until the adopted person has reached the age of 21; but thereafter, the original certificate is available as provided by the Adoption Act. Amends the Adoption Act. Provides that for purposes of the Act, a "surviving spouse" of an adopted or surrendered person must be age 21 or over. Provides that the Registry may not release identity information when a birth parent is deceased and when the deceased birth parent's Birth Preference Form indicates that the birth parent did not allow the release of identifying information and did not want to be contacted by the birth child after the child attains the age of 21. Provides that the Medical Information Exchange Questionnaire shall include a comprehensive check-list of medical conditions, including those of genetic origin. Makes other changes. Effective immediately.

LRB097 07482 RPM 47592 b

1 AN ACT concerning families.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Vital Records Act is amended by changing  
5 Section 17 as follows:

6 (410 ILCS 535/17) (from Ch. 111 1/2, par. 73-17)

7 Sec. 17. (1) For a person born in this State, the State  
8 Registrar of Vital Records shall establish a new certificate of  
9 birth when he receives any of the following:

10 (a) A certificate of adoption as provided in Section 16  
11 or a certified copy of the order of adoption together with  
12 the information necessary to identify the original  
13 certificate of birth and to establish the new certificate  
14 of birth; except that a new certificate of birth shall not  
15 be established if so requested by the court ordering the  
16 adoption, the adoptive parents, or the adopted person.

17 (b) A certificate of adoption or a certified copy of  
18 the order of adoption entered in a court of competent  
19 jurisdiction of any other state or country declaring  
20 adopted a child born in the State of Illinois, together  
21 with the information necessary to identify the original  
22 certificate of birth and to establish the new certificate  
23 of birth; except that a new certificate of birth shall not

1           be established if so requested by the court ordering the  
2           adoption, the adoptive parents, or the adopted person.

3           (c) A request that a new certificate be established and  
4           such evidence as required by regulation proving that such  
5           person has been legitimized, or that the circuit court,  
6           the Department of Healthcare and Family Services (formerly  
7           Illinois Department of Public Aid), or a court or  
8           administrative agency of any other state has established  
9           the paternity of such a person by judicial or  
10          administrative processes or by voluntary acknowledgment,  
11          which is accompanied by the social security numbers of all  
12          persons determined and presumed to be the parents.

13          (d) An affidavit by a physician that he has performed  
14          an operation on a person, and that by reason of the  
15          operation the sex designation on such person's birth record  
16          should be changed. The State Registrar of Vital Records may  
17          make any investigation or require any further information  
18          he deems necessary.

19          Each request for a new certificate of birth shall be  
20          accompanied by a fee of \$15 and entitles the applicant to one  
21          certification or certified copy of the new certificate. If the  
22          request is for additional copies, it shall be accompanied by a  
23          fee of \$2 for each additional certification or certified copy.

24          (2) When a new certificate of birth is established, the  
25          actual place and date of birth shall be shown; provided, in the  
26          case of adoption of a person born in this State by parents who

1 were residents of this State at the time of the birth of the  
2 adopted person, the place of birth may be shown as the place of  
3 residence of the adoptive parents at the time of such person's  
4 birth, if specifically requested by them, and any new  
5 certificate of birth established prior to the effective date of  
6 this amendatory Act may be corrected accordingly if so  
7 requested by the adoptive parents or the adopted person when of  
8 legal age. The social security numbers of the parents shall not  
9 be recorded on the certificate of birth. The social security  
10 numbers may only be used for purposes allowed under federal  
11 law. The new certificate shall be substituted for the original  
12 certificate of birth:

13 (a) Thereafter, the original certificate and the  
14 evidence of adoption, paternity, legitimation, or sex  
15 change shall not be subject to inspection or certification  
16 except upon order of the circuit court or as provided by  
17 regulation. If the new certificate was issued subsequent to  
18 an adoption, the original certificate shall not be subject  
19 to inspection until the adopted person has reached the age  
20 of 21; thereafter, the original certificate shall be made  
21 available as provided by Section 18.1b of the Adoption Act.

22 (b) Upon receipt of notice of annulment of adoption,  
23 the original certificate of birth shall be restored to its  
24 place in the files, and the new certificate and evidence  
25 shall not be subject to inspection or certification except  
26 upon order of the circuit court.

1           (3) If no certificate of birth is on file for the person  
2 for whom a new certificate is to be established under this  
3 Section, a delayed record of birth shall be filed with the  
4 State Registrar of Vital Records as provided in Section 14 or  
5 Section 15 of this Act before a new certificate of birth is  
6 established, except that when the date and place of birth and  
7 parentage have been established in the adoption proceedings, a  
8 delayed record shall not be required.

9           (4) When a new certificate of birth is established by the  
10 State Registrar of Vital Records, all copies of the original  
11 certificate of birth in the custody of any custodian of  
12 permanent local records in this State shall be transmitted to  
13 the State Registrar of Vital Records as directed, and shall be  
14 sealed from inspection except as provided by Section 18.1b of  
15 the Adoption Act.

16           (5) Nothing in this Section shall be construed to prohibit  
17 the amendment of a birth certificate in accordance with  
18 subsection (6) of Section 22.

19 (Source: P.A. 95-331, eff. 8-21-07.)

20           Section 10. The Adoption Act is amended by changing  
21 Sections 18.06, 18.1, 18.1a, 18.1b, 18.2, 18.3a, and 18.6 as  
22 follows:

23           (750 ILCS 50/18.06)

24           Sec. 18.06. Definitions. When used in Sections 18.05

1 through Section 18.6, for the purposes of the Registry:

2 "Adopted person" means a person who was adopted pursuant to  
3 the laws in effect at the time of the adoption.

4 "Adoptive parent" means a person who has become a parent  
5 through the legal process of adoption.

6 "Adult child" means the biological child 21 years of age or  
7 over of a deceased adopted or surrendered person.

8 "Adult Adopted or Surrendered Person" means an adopted or  
9 surrendered person 21 years of age or over.

10 "Agency" means a public child welfare agency or a licensed  
11 child welfare agency.

12 "Birth aunt" means the adult full or half sister of a  
13 deceased birth parent.

14 "Birth father" means the biological father of an adopted or  
15 surrendered person who is named on the original certificate of  
16 live birth or on a consent or surrender document, or a  
17 biological father whose paternity has been established by a  
18 judgment or order of the court, pursuant to the Illinois  
19 Parentage Act of 1984.

20 "Birth mother" means the biological mother of an adopted or  
21 surrendered person.

22 "Birth parent" means a birth mother or birth father of an  
23 adopted or surrendered person.

24 "Birth Parent Preference Form" means the form prepared by  
25 the Department of Public Health pursuant to Section 18.2  
26 completed by a birth parent registrant and filed with the

1 Registry that indicates the birth parent's preferences  
2 regarding contact and, if applicable, the release of his or her  
3 identifying information on the non-certified copy of the  
4 original birth certificate released to an adult adopted or  
5 surrendered person or to the surviving adult child or surviving  
6 spouse of a deceased adopted or surrendered person who has  
7 filed a Request for a Non-Certified Copy of an Original Birth  
8 Certificate.

9 "Birth relative" means a birth mother, birth father, birth  
10 sibling, birth aunt, or birth uncle.

11 "Birth sibling" means the adult full or half sibling of an  
12 adopted or surrendered person.

13 "Birth uncle" means the adult full or half brother of a  
14 deceased birth parent.

15 "Confidential intermediary" means an individual certified  
16 by the Department of Children and Family Services pursuant to  
17 Section 18.3a(e).

18 "Denial of Information Exchange" means an affidavit  
19 completed by a registrant with the Illinois Adoption Registry  
20 and Medical Information Exchange denying the release of  
21 identifying information which has been filed with the Registry.

22 "Information Exchange Authorization" means an affidavit  
23 completed by a registrant with the Illinois Adoption Registry  
24 and Medical Information Exchange authorizing the release of  
25 identifying information which has been filed with the Registry.

26 "Medical Information Exchange Questionnaire" means the

1 medical history questionnaire completed by a registrant of the  
2 Illinois Adoption Registry and Medical Information Exchange.

3 "Non-certified Copy of the Original Birth Certificate"  
4 means a non-certified copy of the original certificate of live  
5 birth of an adult adopted or surrendered person who was born in  
6 Illinois.

7 "Proof of death" means a death certificate.

8 "Registrant" or "Registered Party" means a birth parent,  
9 birth sibling, birth aunt, birth uncle, adopted or surrendered  
10 person 21 years of age or over, adoptive parent or legal  
11 guardian of an adopted or surrendered person under the age of  
12 21, or adoptive parent, surviving spouse, or adult child of a  
13 deceased adopted or surrendered person who has filed an  
14 Illinois Adoption Registry Application or Registration  
15 Identification Form with the Registry.

16 "Registry" means the Illinois Adoption Registry and  
17 Medical Information Exchange.

18 "Request for a Non-Certified Copy of an Original Birth  
19 Certificate" means an affidavit completed by an adult adopted  
20 or surrendered person or by the surviving adult child or  
21 surviving spouse of a deceased adopted or surrendered person  
22 and filed with the Registry requesting a non-certified copy of  
23 an adult adopted or surrendered person's original certificate  
24 of live birth in Illinois.

25 "Surrendered person" means a person whose parents' rights  
26 have been surrendered or terminated but who has not been



1 adopted.

2 "Surviving spouse" means the wife or husband, 21 years of  
3 age or older, of a deceased adopted or surrendered person who  
4 would be 21 years of age or older if still alive and who has one  
5 or more surviving biological children who are under the age of  
6 21.

7 "18.3 Statement" means a statement regarding the  
8 disclosure of identifying information signed by a birth parent  
9 under Section 18.3 of this Act as it existed immediately prior  
10 to the effective date of this amendatory Act of the 96th  
11 General Assembly.

12 (Source: P.A. 96-895, eff. 5-21-10.)

13 (750 ILCS 50/18.1) (from Ch. 40, par. 1522.1)

14 Sec. 18.1. Disclosure of identifying information.

15 (a) The Department of Public Health shall establish and  
16 maintain a Registry for the purpose of allowing mutually  
17 consenting members of birth and adoptive families to exchange  
18 identifying and medical information. Identifying information  
19 for the purpose of this Act shall mean any one or more of the  
20 following:

21 (1) The name and last known address of the consenting  
22 person or persons.

23 (2) A copy of the Illinois Adoption Registry  
24 Application of the consenting person or persons.

25 (3) A non-certified copy of the original birth

1 certificate of an adult adopted or surrendered person.

2 (b) Written authorization from all parties identified must  
3 be received prior to disclosure of any identifying information,  
4 with the exception of non-certified copies of original birth  
5 certificates released to adult adopted or surrendered persons  
6 or to surviving adult children and surviving spouses of  
7 deceased adopted or surrendered persons pursuant to the  
8 procedures outlined in Section 18.1b(e).

9 (c) At any time after a child is surrendered for adoption,  
10 or at any time during the adoption proceedings or at any time  
11 thereafter, either birth parent or both of them may file with  
12 the Registry a Birth Parent Registration Identification Form  
13 ~~and an Information Exchange Authorization or a Denial of~~  
14 ~~Information Exchange.~~

15 (d) A birth sibling 21 years of age or over who was not  
16 surrendered for adoption and who has submitted a copy of his or  
17 her birth certificate as well as proof of death for a deceased  
18 birth parent and such birth parent did not file a Denial of  
19 Information Exchange or a Birth Parent Preference Form on which  
20 Option E was selected with the Registry prior to his or her  
21 death may file a Registration Identification Form and an  
22 Information Exchange Authorization or a Denial of Information  
23 Exchange.

24 (e) A birth aunt or birth uncle who has submitted birth  
25 certificates for himself or herself and for a deceased birth  
26 parent naming at least one common biological parent as well as

1 proof of death for the deceased birth parent and such birth  
2 parent did not file a Denial of Information Exchange or a Birth  
3 Parent Preference Form on which Option E was selected with the  
4 Registry prior to his or her death may file a Registration  
5 Identification Form and an Information Exchange Authorization  
6 or a Denial of Information Exchange.

7 (f) Any adopted person 21 years of age or over, any  
8 surrendered person 21 years of age or over, or any adoptive  
9 parent or legal guardian of an adopted or surrendered person  
10 under the age of 21 may file with the Registry a Registration  
11 Identification Form and an Information Exchange Authorization  
12 or a Denial of Information Exchange.

13 (g) Any adult child 21 years of age or over of a deceased  
14 adopted or surrendered person who has submitted a copy of his  
15 or her birth certificate naming an adopted or surrendered  
16 person as his or her biological parent as well as proof of  
17 death for the deceased adopted or surrendered person and such  
18 adopted or surrendered person did not file a Denial of  
19 Information Exchange with the Registry prior to his or her  
20 death may file a Registration Identification Form and an  
21 Information Exchange Authorization or a Denial of Information  
22 Exchange.

23 (h) Any surviving spouse of a deceased adopted or  
24 surrendered person 21 years of age or over who has submitted  
25 proof of death for the deceased adopted or surrendered person  
26 and such adopted or surrendered person did not file a Denial of

1 Information Exchange with the Registry prior to his or her  
2 death as well as a birth certificate naming themselves and the  
3 adopted or surrendered person as the parents of a minor child  
4 under the age of 21 may file a Registration Identification Form  
5 and an Information Exchange Authorization or a Denial of  
6 Information Exchange.

7 (i) Any adoptive parent or legal guardian of a deceased  
8 adopted or surrendered person who is 21 years of age or over  
9 who has submitted proof of death as well as proof of parentage  
10 or guardianship for the deceased adopted or surrendered person  
11 and such adopted or surrendered person did not file a Denial of  
12 Information Exchange with the Registry prior to his or her  
13 death may file a Registration Identification Form and an  
14 Information Exchange Authorization or a Denial of Information  
15 Exchange.

16 (j) The Department of Public Health shall supply to the  
17 adopted or surrendered person or his or her adoptive parents,  
18 legal guardians, adult children or surviving spouse, and to the  
19 birth parents identifying information only if both the adopted  
20 or surrendered person, or one of his or her adoptive parents,  
21 legal guardians, adult children or his or her surviving spouse,  
22 and the birth parents have filed with the Registry an  
23 Information Exchange Authorization or a Birth Parent  
24 Preference Form on which Option A, B, or C was selected and the  
25 information at the Registry indicates that the consenting  
26 adopted or surrendered person, the child of the consenting

1 adoptive parents or legal guardians, the parent of the  
2 consenting adult child of the adopted or surrendered person, or  
3 the deceased wife or husband of the consenting surviving spouse  
4 is the child of the consenting birth parents, except  
5 identifying information that appears on a non-certified copy of  
6 an original birth certificate may be provided to an adult  
7 adopted or surrendered person or to the surviving adult child  
8 or surviving spouse of a deceased adopted or surrendered person  
9 pursuant to the procedures outlined in Section 18.1b(e) of this  
10 Act.

11 The Department of Public Health shall supply to adopted or  
12 surrendered persons who are birth siblings identifying  
13 information only if both siblings have filed with the Registry  
14 an Information Exchange Authorization and the information at  
15 the Registry indicates that the consenting siblings have one or  
16 both birth parents in common. Identifying information shall be  
17 supplied to consenting birth siblings who were adopted or  
18 surrendered if any such sibling is 21 years of age or over.  
19 Identifying information shall be supplied to consenting birth  
20 siblings who were not adopted or surrendered if any such  
21 sibling is 21 years of age or over and has proof of death of the  
22 common birth parent and such birth parent did not file a Denial  
23 of Information Exchange or a Birth Parent Preference Form on  
24 which Option E was selected with the Registry prior to his or  
25 her death.

26 (k) The Department of Public Health shall supply to the

1 adopted or surrendered person or his or her adoptive parents,  
2 legal guardians, adult children or surviving spouse, and to a  
3 birth aunt identifying information only if both the adopted or  
4 surrendered person or one of his or her adoptive parents, legal  
5 guardians, adult children or his or her surviving spouse, and  
6 the birth aunt have filed with the Registry an Information  
7 Exchange Authorization and the information at the Registry  
8 indicates that the consenting adopted or surrendered person, or  
9 the child of the consenting adoptive parents or legal  
10 guardians, or the parent of the consenting adult child, or the  
11 deceased wife or husband of the consenting surviving spouse of  
12 the adopted or surrendered person is or was the child of the  
13 brother or sister of the consenting birth aunt.

14 (1) The Department of Public Health shall supply to the  
15 adopted or surrendered person or his or her adoptive parents,  
16 legal guardians, adult children or surviving spouse, and to a  
17 birth uncle identifying information only if both the adopted or  
18 surrendered person or one of his or her adoptive parents, legal  
19 guardians, adult children or his or her surviving spouse, and  
20 the birth uncle have filed with the Registry an Information  
21 Exchange Authorization and the information at the Registry  
22 indicates that the consenting adopted or surrendered person, or  
23 the child of the consenting adoptive parents or legal  
24 guardians, or the parent of the consenting adult child, or the  
25 deceased wife or husband of the consenting surviving spouse of  
26 the adopted or surrendered person is or was the child of the

1 brother or sister of the consenting birth uncle.

2 (m) A registrant may notify the Registry of his or her  
3 desire not to have identifying information revealed or may  
4 revoke any previously filed Information Exchange Authorization  
5 by completing and filing with the Registry a Registry  
6 Identification Form along with a Denial of Information Exchange  
7 or, if applicable, a Birth Parent Preference Form. Any  
8 registrant, except a birth parent, may revoke his or her Denial  
9 of Information Exchange by filing an Information Exchange  
10 Authorization. A birth parent may revoke a Denial of  
11 Information Exchange by filing a Birth Parent Preference Form.  
12 Any birth parent who has previously filed a Birth Parent  
13 Preference Form where Option E was selected may revoke such  
14 preference by filing a subsequent Birth Parent Preference Form  
15 and selecting Option A, B, C, or D. The Department of Public  
16 Health shall act in accordance with the most recently filed  
17 affidavit.

18 (n) Identifying information ascertained from the Registry  
19 shall be confidential and may be disclosed only (1) upon a  
20 Court Order, which order shall name the person or persons  
21 entitled to the information, or (2) to a registrant who is the  
22 subject of an Information Exchange Authorization or, if  
23 applicable, a Birth Parent Preference Form that was completed  
24 by another registrant and filed with the Illinois Adoption  
25 Registry and Medical Information Exchange, or (3) as authorized  
26 under subsection (h) of Section 18.3 of this Act, or (4)

1 pursuant to the procedures outlined in Section 18.1b(e) of this  
2 Act. Any person who willfully provides unauthorized disclosure  
3 of any information filed with the Registry or who knowingly or  
4 intentionally files false information with the Registry shall  
5 be guilty of a Class A misdemeanor and shall be liable for  
6 damages.

7 (o) If information is disclosed pursuant to this Act, the  
8 Department shall redact it to remove any identifying  
9 information about any party who has not consented to the  
10 disclosure of such identifying information, or, in the case of  
11 identifying information on the original birth certificate,  
12 pursuant to Section 18.1b(e) of this Act.

13 (Source: P.A. 96-895, eff. 5-21-10.)

14 (750 ILCS 50/18.1a)

15 Sec. 18.1a. Registry matches.

16 (a) The Registry shall release identifying information, as  
17 specified on the applicant's Information Exchange  
18 Authorization or, if applicable, a Birth Parent Preference  
19 Form, to the following mutually consenting registered parties  
20 and provide them with any photographs or correspondence which  
21 have been placed in the Adoption/Surrender Records File and are  
22 specifically intended for the registered parties:

23 (i) an adult adopted or surrendered person and one of  
24 his or her birth relatives who have both filed an  
25 applicable Information Exchange Authorization or, if



1 applicable, a Birth Parent Preference Form specifying the  
2 other consenting party with the Registry, if information  
3 available to the Registry confirms that the consenting  
4 adopted or surrendered person is biologically related to  
5 the consenting birth relative;

6 (ii) the adoptive parent or legal guardian of an  
7 adopted or surrendered person under the age of 21 and one  
8 of the adopted or surrendered person's birth relatives who  
9 have both filed an Information Exchange Authorization  
10 specifying the other consenting party ~~with the Registry,~~  
11 or, if applicable, a Birth Parent Preference Form, with the  
12 Registry, if information available to the Registry  
13 confirms that the child of the consenting adoptive parent  
14 or legal guardian is biologically related to the consenting  
15 birth relative; and

16 (iii) the adoptive parent, adult child or surviving  
17 spouse of a deceased adopted or surrendered person, and one  
18 of the adopted or surrendered person's birth relatives who  
19 have both filed an applicable Information Exchange  
20 Authorization specifying the other consenting party ~~with~~  
21 ~~the Registry,~~ or, if applicable, a Birth Parent Preference  
22 Form, with the Registry, if information available to the  
23 Registry confirms that the child of the consenting adoptive  
24 parent, the parent of the consenting adult child or the  
25 deceased wife or husband of the consenting surviving spouse  
26 of the adopted or surrendered person was biologically

1 related to the consenting birth relative.

2 (b) If a registrant is the subject of a Denial of  
3 Information Exchange filed by another registered party or is an  
4 adopted or surrendered person, or the surviving relative of a  
5 deceased adopted or surrendered person, and a birth parent of  
6 the adopted or surrendered person completed a Birth Parent  
7 Preference Form and selected Option E, the Registry shall not  
8 release identifying information to either registrant or, if  
9 applicable, to an adopted person who has requested a copy of  
10 his or her original birth certificate, with the exception of  
11 non-certified copies of the original birth certificate  
12 released under Section 18.1b(e), and as to a birth parent who  
13 has prohibited release of identifying information on the  
14 original birth certificate to the adult adopted or surrendered  
15 person, upon the death of said birth parent.

16 (c) If a registrant has completed a Medical Information  
17 Exchange Questionnaire and has consented to its disclosure,  
18 that Questionnaire shall be released to any registered party  
19 who has indicated their desire to receive such information on  
20 his or her Illinois Adoption Registry Application, if  
21 information available to the Registry confirms that the  
22 consenting parties are biologically related, that the  
23 consenting birth relative and the child of the consenting  
24 adoptive parents or legal guardians are birth relatives, or  
25 that the consenting birth relative and the deceased wife or  
26 husband of the consenting surviving spouse are birth relatives.

1 (Source: P.A. 96-895, eff. 5-21-10.)

2 (750 ILCS 50/18.1b)

3 Sec. 18.1b. The Illinois Adoption Registry Application.  
4 The Illinois Adoption Registry Application shall substantially  
5 include the following:

6 (a) General Information. The Illinois Adoption Registry  
7 Application shall include the space to provide Information  
8 about the registrant including his or her surname, given name  
9 or names, social security number (optional), mailing address,  
10 home telephone number, gender, date and place of birth, and the  
11 date of registration. If applicable and known to the  
12 registrant, he or she may include the maiden surname of the  
13 birth mother, any subsequent surnames of the birth mother, the  
14 surname of the birth father, the given name or names of the  
15 birth parents, the dates and places of birth of the birth  
16 parents, the surname and given name or names of the adopted  
17 person prior to adoption, the gender and date and place of  
18 birth of the adopted or surrendered person, the name of the  
19 adopted person following his or her adoption and the state and  
20 county where the judgment of adoption was finalized.

21 (b) Medical Information Exchange Questionnaire. In  
22 recognition of the importance of medical information and of  
23 recent discoveries regarding the genetic origin of many medical  
24 conditions and diseases all registrants shall be asked to  
25 voluntarily complete a Medical Information Exchange

1 Questionnaire. The Medical Information Exchange Questionnaire  
2 shall include a comprehensive check-list of medical conditions  
3 and diseases including those of genetic origin.

4 (1) ~~For birth relatives, the Medical Information~~  
5 ~~Exchange Questionnaire shall include a comprehensive~~  
6 ~~check list of medical conditions and diseases including~~  
7 ~~those of genetic origin.~~ Birth relatives shall be asked to  
8 indicate all genetically-inherited diseases and conditions  
9 on this list which are known to exist in the adopted or  
10 surrendered person's birth family at the time of  
11 registration. In addition, all birth relatives shall be  
12 apprised of the Registry's provisions for voluntarily  
13 submitting information about their and their family's  
14 medical histories on a confidential, ongoing basis.

15 (2) Adopted and surrendered persons and their adoptive  
16 parents, legal guardians, adult children, and surviving  
17 spouses shall be asked to indicate all  
18 genetically-inherited diseases and medical conditions with  
19 which the adopted or surrendered person or, if applicable,  
20 his or her children have been diagnosed since birth.

21 (3) The Medical Information Exchange Questionnaire  
22 shall include a space where the registrant may authorize  
23 the release of the Medical Information Exchange  
24 Questionnaire to specified registered parties and a  
25 disclaimer informing registrants that the Department of  
26 Public Health cannot guarantee the accuracy of medical

1 information exchanged through the Registry.

2 (c) Written statement. All registrants shall be given the  
3 opportunity to voluntarily file a written statement with the  
4 Registry. This statement shall be submitted in the space  
5 provided. No written statement submitted to the Registry shall  
6 include identifying information pertaining to any person other  
7 than the registrant who submitted it. Any such identifying  
8 information shall be redacted by the Department or returned for  
9 removal of identifying information.

10 (d) Exchange of information. All registrants except birth  
11 parents may indicate their wishes regarding contact and the  
12 exchange of identifying and/or medical information with any  
13 other registrant by completing an Information Exchange  
14 Authorization or a Denial of Information Exchange. Birth  
15 parents may indicate their wishes regarding contact by filing a  
16 Birth Parent Preference Form pursuant to the procedures  
17 outlined in this Section.

18 (1) Information Exchange Authorization. Adopted or  
19 surrendered persons 21 years of age or over who are  
20 interested in exchanging identifying and/or medical  
21 information or would welcome contact with one or more of  
22 their birth relatives; ~~birth parents who are interested in~~  
23 ~~exchanging identifying and/or medical information or would~~  
24 ~~welcome contact with an adopted or surrendered person 21~~  
25 ~~years of age or over, or one or more of his or her adoptive~~  
26 ~~parents, legal guardians, adult children, or a surviving~~

1 ~~spouse,~~ birth siblings 21 years of age or over who were  
2 adopted or surrendered and who are interested in exchanging  
3 identifying and/or medical information or would welcome  
4 contact with an adopted or surrendered person, or one or  
5 more of his or her adoptive parents, legal guardians, adult  
6 children, or a surviving spouse; birth siblings 21 years of  
7 age or over who were not surrendered and who have submitted  
8 proof of death for any common birth parent who did not file  
9 a Denial of Information Exchange or a Birth Parent  
10 Preference Form on which Option E was selected prior to his  
11 or her death, and who are interested in exchanging  
12 identifying and/or medical information or would welcome  
13 contact with an adopted or surrendered person, or one or  
14 more of his or her adoptive parents, legal guardians, adult  
15 children, or a surviving spouse; birth aunts and birth  
16 uncles 21 years of age or over who have submitted birth  
17 certificates for themselves and a deceased birth parent  
18 naming at least one common biological parent as well as  
19 proof of death for a deceased birth parent and who are  
20 interested in exchanging identifying and/or medical  
21 information or would welcome contact with an adopted or  
22 surrendered person 21 years of age or over, or one or more  
23 of his or her adoptive parents, legal guardians, adult  
24 children or a surviving spouse; adoptive parents or legal  
25 guardians of adopted or surrendered persons under the age  
26 of 21 who are interested in exchanging identifying and/or

1 medical information or would welcome contact with one or  
2 more of the adopted or surrendered person's birth  
3 relatives; adoptive parents and legal guardians of  
4 deceased adopted or surrendered persons 21 years of age or  
5 over who have submitted proof of death for a deceased  
6 adopted or surrendered person who did not file a Denial of  
7 Information Exchange prior to his or her death and who are  
8 interested in exchanging identifying and/or medical  
9 information or would welcome contact with one or more of  
10 the adopted or surrendered person's birth relatives; adult  
11 children of deceased adopted or surrendered persons who  
12 have submitted a birth certificate naming the adopted or  
13 surrendered person as their biological parent and proof of  
14 death for an adopted or surrendered person who did not file  
15 a Denial of Information Exchange prior to his or her death;  
16 and surviving spouses of deceased adopted or surrendered  
17 persons who have submitted a marriage certificate naming an  
18 adopted or surrendered person as their deceased wife or  
19 husband and proof of death for an adopted or surrendered  
20 person who did not file a Denial of Information Exchange  
21 prior to his or her death and who are interested in  
22 exchanging identifying and/or medical information or would  
23 welcome contact with one or more of the adopted or  
24 surrendered person's birth relatives may specify with whom  
25 they wish to exchange identifying information by filing an  
26 Information Exchange Authorization.

1           (2) Denial of Information Exchange. Adopted or  
2 surrendered persons 21 years of age or over who do not wish  
3 to exchange identifying information or establish contact  
4 with one or more of their birth relatives may specify with  
5 whom they do not wish to exchange identifying information  
6 or do not wish to establish contact by filing a Denial of  
7 Information Exchange. Birth relatives other than birth  
8 parents who do not wish to establish contact with an  
9 adopted or surrendered person or one or more of his or her  
10 adoptive parents, legal guardians, or adult children may  
11 specify with whom they do not wish to exchange identifying  
12 information or do not wish to establish contact by filing a  
13 Denial of Information Exchange. Birth parents who wish to  
14 prohibit the release of their identifying information on  
15 the original birth certificate released to an adult adopted  
16 or surrendered person who was born after January 1, 1946,  
17 or to the surviving adult child or surviving spouse of a  
18 deceased adopted or surrendered person who was born after  
19 January 1, 1946, may do so by filing a Denial with the  
20 Registry on or before December 31, 2010. ~~As of January 1,~~  
21 ~~2011, birth parents who wish to prohibit the release of~~  
22 ~~identifying information on the non-certified copy of the~~  
23 ~~original birth certificate released to an adult adopted~~  
24 ~~surrendered person or to the surviving adult child or~~  
25 ~~surviving spouse of a deceased adopted or surrendered~~  
26 ~~person may do so by selecting Option E on a Birth Parent~~



1 ~~Preference Form and filing the Form with the Registry.~~  
2 Adoptive parents or legal guardians of adopted or  
3 surrendered persons under the age of 21 who do not wish to  
4 establish contact with one or more of the adopted or  
5 surrendered person's birth relatives may specify with whom  
6 they do not wish to exchange identifying information by  
7 filing a Denial of Information Exchange. Adoptive parents,  
8 adult children, and surviving spouses of deceased adoptees  
9 who do not wish to exchange identifying information or  
10 establish contact with one or more of the adopted or  
11 surrendered person's birth relatives may specify with whom  
12 they do not wish to exchange identifying information or do  
13 not wish to establish contact by filing a Denial of  
14 Information Exchange.

15 (3) Birth Parent Preference Form. Beginning January 1,  
16 2011, birth parents who are eligible to register with the  
17 Illinois Adoption Registry and Medical Information  
18 Exchange and whose birth child was born on or after January  
19 1, 1946 may ~~who wish to~~ communicate their wishes regarding  
20 contact or may prohibit ~~and/or~~ the release of ~~their~~  
21 identifying information on the non-certified copy of the  
22 original birth certificate released under subsection (e)  
23 of this Section by filing ~~to an adult adopted or~~  
24 ~~surrendered person or the surviving adult child or~~  
25 ~~surviving spouse of a deceased adopted or surrendered~~  
26 ~~person who has requested a copy of the adopted or~~

1 ~~surrendered person's original birth certificate by filing~~  
2 ~~a Request for a Non-Certified Copy of an Original Birth~~  
3 ~~Certificate pursuant to subsection (e) of this Section, may~~  
4 ~~file~~ a Birth Parent Preference Form with the Registry.  
5 Birth parents whose birth child was born before January 1,  
6 1946, may communicate their wishes regarding contact by  
7 completing a Birth Parent Preference Form, selecting  
8 Option A, B, C, or D, and filing the form with the  
9 Registry, but may not prohibit the release of identifying  
10 information. All Birth Parent Preference Forms on file with  
11 the Registry at the time of receipt of a Request for a  
12 Non-Certified Copy of an Original Birth Certificate from an  
13 adult adopted or surrendered person or the surviving adult  
14 child or surviving spouse of a deceased adopted or  
15 surrendered person shall be forwarded to the relevant  
16 adopted or surrendered person or surviving adult child or  
17 surviving spouse of a deceased adopted or surrendered  
18 person along with a non-certified copy of the adopted or  
19 surrendered person's original birth certificate as  
20 outlined in subsection (e) of this Section.

21 (e) Procedures for requesting a non-certified copy of an  
22 original birth certificate by an adult adopted or surrendered  
23 person or by a surviving adult child or surviving spouse of a  
24 deceased adopted or surrendered person:

25 (1) On or after the effective date of this amendatory  
26 Act of the 96th General Assembly, any adult adopted or

1 surrendered person who was born in Illinois prior to  
2 January 1, 1946, may complete and file with the Registry a  
3 Request for a Non-Certified Copy of an Original Birth  
4 Certificate. The Registry shall provide such adult adopted  
5 or surrendered person with an unaltered, non-certified  
6 copy of his or her original birth certificate upon receipt  
7 of the Request for a Non-Certified Copy of an Original  
8 Birth Certificate. Additionally, in cases where an adopted  
9 or surrendered person born in Illinois prior to January 1,  
10 1946, is deceased, and one of his or her surviving adult  
11 children or his or her surviving spouse has registered with  
12 the Registry, he or she may complete and file with the  
13 Registry a Request for a Non-Certified Copy of an Original  
14 Birth Certificate. The Registry shall provide such  
15 surviving adult child or surviving spouse with an  
16 unaltered, non-certified copy of the adopted or  
17 surrendered person's original birth certificate upon  
18 receipt of the Request for a Non-Certified Copy of an  
19 Original Birth Certificate.

20 (2) Beginning November 15, 2011, any adult adopted or  
21 surrendered person who was born in Illinois on or after  
22 January 1, 1946, may complete and file with the Registry a  
23 Request for a Non-certified Copy of an Original Birth  
24 Certificate. Additionally, in cases where the adopted or  
25 surrendered person is deceased and one of his or her  
26 surviving adult children or his or her surviving spouse has

1 registered with the Registry, he or she may complete and  
2 file with the Registry a Request for a Non-Certified Copy  
3 of an Original Birth Certificate. Upon receipt of such  
4 request from an adult adopted or surrendered person or from  
5 one of his or her surviving adult children or his or her  
6 surviving spouse, the Registry shall:

7 (i) Determine if there is a Denial of Information  
8 Exchange which was filed by a birth parent named on the  
9 original birth certificate prior to January 1, 2011. If  
10 a Denial was filed by a birth parent named on the  
11 original birth certificate prior to January 1, 2011,  
12 and there is no proof of death in the Registry file for  
13 the birth parent who filed said Denial, the Registry  
14 shall inform the requesting adult adopted or  
15 surrendered person or the requesting surviving adult  
16 child or surviving spouse of a deceased adopted or  
17 surrendered person that they may receive a  
18 non-certified copy of the original birth certificate  
19 from which all identifying information pertaining to  
20 the birth parent who filed the Denial has been  
21 redacted. A requesting adult adopted or surrendered  
22 person shall also be informed in writing of his or her  
23 right to petition the court for the appointment of a  
24 confidential intermediary pursuant to Section 18.3a of  
25 this Act and, if applicable, to conduct a search  
26 through an agency post-adoption search program once 5

1 years have elapsed since the birth parent filed the  
2 Denial of Information Exchange with the Registry.

3 (ii) Determine if a birth parent named on the  
4 original birth certificate has filed a Birth Parent  
5 Preference Form. If one of the birth parents named on  
6 the original birth certificate filed a Birth Parent  
7 Preference Form and selected Option A, B, C, or D, the  
8 Registry shall forward to the adult adopted or  
9 surrendered person or to the surviving adult child or  
10 surviving spouse of a deceased adopted or surrendered  
11 person a copy of the Birth Parent Preference Form along  
12 with an unaltered non-certified copy of his or her  
13 original birth certificate. If one of the birth parents  
14 named on the original birth certificate filed a Birth  
15 Parent Preference Form and selected Option E, and there  
16 is no proof of death in the Registry file for the birth  
17 parent who filed said Birth Parent Preference Form, the  
18 Registry shall inform the requesting adult adopted or  
19 surrendered person or the requesting surviving adult  
20 child or surviving spouse of a deceased adopted or  
21 surrendered person that he or she may receive a  
22 non-certified copy of the original birth certificate  
23 from which identifying information pertaining to the  
24 birth parent who completed the Birth Parent Preference  
25 Form has been redacted per the birth parent's  
26 specifications on the Form. The Registry shall forward

1 to the adult adopted or surrendered person or to the  
2 surviving adult child or surviving spouse of a deceased  
3 adopted or surrendered person a copy of the Birth  
4 Parent Preference Form filed by the birth parent from  
5 which identifying information has been redacted per  
6 the birth parent's specifications on the Form. The  
7 requesting adult adopted or surrendered person shall  
8 also be informed in writing of his or her right to  
9 petition the court for the appointment of a  
10 confidential intermediary pursuant to Section 18.3a of  
11 this Act, and, if applicable, to conduct a search  
12 through an agency post-adoption search program once 5  
13 years have elapsed since the birth parent filed the  
14 Birth Parent Preference Form, on which Option E was  
15 selected, with the Registry.

16 (iii) Determine if a birth parent named on the  
17 original birth certificate has filed an Information  
18 Exchange Authorization.

19 (iv) If the Registry has confirmed that a  
20 requesting adult adopted or surrendered person or the  
21 parent of a requesting adult child of a deceased  
22 adopted or surrendered person or the husband or wife of  
23 a requesting surviving spouse was not the object of a  
24 Denial of Information Exchange filed by a birth parent  
25 on or before December 31, 2010, and that no birth  
26 parent named on the original birth certificate has

1 filed a Birth Parent Preference Form where Option E was  
2 selected prior to the receipt of a Request for a  
3 Non-Certified Copy of an Original Birth Certificate,  
4 the Registry shall provide the adult adopted or  
5 surrendered person or his or her surviving adult child  
6 or surviving spouse with an unaltered non-certified  
7 copy of the adopted or surrendered person's original  
8 birth certificate.

9 (3) In cases where the Registry receives a Birth Parent  
10 Preference Form from a birth parent subsequent to the  
11 release of the non-certified copy of the original birth  
12 certificate to an adult adopted or surrendered person or to  
13 the surviving adult child or surviving spouse of a deceased  
14 adopted or surrendered person, the Birth Parent Preference  
15 Form shall be immediately forwarded to the adult adopted or  
16 surrendered person or to the surviving adult child or  
17 surviving spouse of the deceased adopted or surrendered  
18 person and the birth parent who filed the form shall be  
19 informed that the relevant original birth certificate has  
20 already been released.

21 (4) A copy of the original birth certificate shall only  
22 be released to adopted or surrendered persons who were born  
23 in Illinois; to surviving adult children or surviving  
24 spouses of deceased adopted or surrendered persons who were  
25 born in Illinois; or to 2 registered parties who have both  
26 consented to the release of a non-certified copy of the

1 original birth certificate to one another through the  
2 Registry when the birth of the relevant adopted or  
3 surrendered person took place in Illinois.

4 (5) In cases where the Registry receives a Request for  
5 a Non-Certified Copy of an Original Birth Certificate from  
6 an adult adopted or surrendered person who has not  
7 completed a Registry application and the file of that  
8 adopted or surrendered person includes an Information  
9 Exchange Authorization, Birth Parent Preference Form, or  
10 Medical Information Exchange Questionnaire from one or  
11 more of his or her birth relatives, the Registry shall so  
12 inform the adult adopted or surrendered person and forward  
13 Registry application forms to him or her along with a  
14 non-certified copy of the original birth certificate  
15 consistent with the procedures outlined in this subsection  
16 (e).

17 (6) In cases where a birth parent registered with the  
18 Registry and filed a Medical Information Exchange  
19 Questionnaire prior to the effective date of this  
20 amendatory Act of the 96th General Assembly but gave no  
21 indication as to his or her wishes regarding contact or the  
22 sharing of identifying information, the Registry shall  
23 contact the birth parent by written letter prior to January  
24 1, 2011, and provide him or her with the opportunity to  
25 indicate his or her preference regarding contact and the  
26 sharing of identifying information by submitting a Birth



1 Parent Preference Form to the Registry prior to November 1,  
2 2011.

3 (7) In cases where the Registry cannot locate a copy of  
4 the original birth certificate in the Registry file, they  
5 shall be authorized to request a copy of the original birth  
6 certificate from the Illinois county where the birth took  
7 place for placement in the Registry file.

8 (8) Adopted and surrendered persons who wish to have  
9 their names placed with the Illinois Adoption Registry and  
10 Medical Information Exchange may do so by completing a  
11 Registry application at any time, but completing a Registry  
12 application shall not be required for adopted and  
13 surrendered persons who seek only to obtain a copy of their  
14 original birth certificate or any relevant Birth Parent  
15 Preference Forms through the Registry.

16 (9) In cases where a birth parent filed a Denial of  
17 Information Exchange with the Registry prior to January 1,  
18 2011, or filed a Birth Parent Preference Form with the  
19 Registry and selected Option E after January 1, 2011, and a  
20 proof of death for the birth parent who filed the Denial or  
21 the Birth Parent Preference Form has been filed with the  
22 Registry by ~~either~~ a confidential intermediary, ~~or~~ a  
23 surviving relative of the deceased birth parent, or a birth  
24 child of the deceased birth parent, the Registry shall be  
25 authorized to release an unaltered non-certified copy of  
26 the original birth certificate to an adult adopted or

1 surrendered person or to the surviving adult child or  
2 surviving spouse of a deceased adopted or surrendered  
3 person who has filed a Request for a Non-Certified Copy of  
4 the Original Birth Certificate with the Registry.

5 (10) On and after the effective date of this amendatory  
6 Act of the 96th General Assembly, in cases where all birth  
7 parents named on the original birth certificate of an  
8 adopted or surrendered person born after January 1, 1946,  
9 are deceased and copies of death certificates for all birth  
10 parents named on the original birth certificate have been  
11 filed with the Registry by either a confidential  
12 intermediary, ~~or~~ a surviving relative of the deceased birth  
13 parent, or a birth child of the deceased birth parent, the  
14 Registry shall be authorized to release a non-certified  
15 copy of the original birth certificate to the adopted or  
16 surrendered person upon receipt of his or her Request for a  
17 Non-Certified Copy of an Original Birth Certificate.

18 (f) A registrant may complete all or any part of the  
19 Illinois Adoption Registry Application. All Illinois Adoption  
20 Registry Applications, Information Exchange Authorizations,  
21 Denials of Information Exchange, requests to revoke an  
22 Information Exchange Authorization or Denial of Information  
23 Exchange, Birth Parent Preference Forms, and affidavits  
24 submitted to the Registry shall be accompanied by proof of  
25 identification.

26 (Source: P.A. 96-895, eff. 5-21-10; revised 9-2-10.)

1 (750 ILCS 50/18.2) (from Ch. 40, par. 1522.2)

2 Sec. 18.2. Forms.

3 (a) The Department shall develop the Illinois Adoption  
4 Registry forms as provided in this Section. The General  
5 Assembly shall reexamine the content of the form as requested  
6 by the Department, in consultation with the Registry Advisory  
7 Council. The form of the Birth Parent Registration  
8 Identification Form shall be substantially as follows:

9 BIRTH PARENT REGISTRATION IDENTIFICATION

10 (Insert all known information)

11 I, ....., state that I am the ..... (mother or father) of the  
12 following child:

13 Child's original name: ..... (first) ..... (middle) .....  
14 (last), ..... (hour of birth), ..... (date of birth),  
15 ..... (city and state of birth), ..... (name of  
16 hospital).

17 Father's full name: ..... (first) ..... (middle) .....  
18 (last), ..... (date of birth), ..... (city and state of  
19 birth).

20 Name of mother inserted on birth certificate: ..... (first)  
21 ..... (middle) ..... (last), ..... (race), ..... (date  
22 of birth), ..... (city and state of birth).

23 That I surrendered my child to: ..... (name of agency),  
24 ..... (city and state of agency), ..... (approximate date  
25 child surrendered).

1 That I placed my child by private adoption: ..... (date),  
2 ..... (city and state).

3 Name of adoptive parents, if known: .....

4 Other identifying information: .....

5 .....

6 (Signature of parent)

7 .....

8 (date) (printed name of parent)

9 (b) The form of the Adopted Person Registration  
10 Identification shall be substantially as follows:

11 ADOPTED PERSON  
12 REGISTRATION IDENTIFICATION  
13 (Insert all known information)

14 I, ....., state the following:

15 Adopted Person's present name: ..... (first) .....  
16 (middle) ..... (last).

17 Adopted Person's name at birth (if known): ..... (first)  
18 ..... (middle) ..... (last), ..... (birth date), .....  
19 (city and state of birth), ..... (sex), ..... (race).

20 Name of adoptive father: ..... (first) ..... (middle) .....  
21 (last), ..... (race).

22 Maiden name of adoptive mother: ..... (first) .....  
23 (middle) ..... (last), ..... (race).

24 Name of birth mother (if known): ..... (first) .....  
25 (middle) ..... (last), ..... (race).

1 Name of birth father (if known): ..... (first) .....  
2 (middle) ..... (last), ..... (race).

3 Name(s) at birth of sibling(s) having a common birth parent  
4 with adoptee (if known): ..... (first) ..... (middle)  
5 ..... (last), ..... (race), and name of common birth  
6 parent: ..... (first) ..... (middle) ..... (last),  
7 ..... (race).

8 I was adopted through: ..... (name of agency).

9 I was adopted privately: ..... (state "yes" if known).

10 I was adopted in ..... (city and state), ..... (approximate  
11 date).

12 Other identifying information: .....

13 .....

14 (signature of adoptee)

15 .....

16 (date) (printed name of adoptee)

17 (c) The form of the Surrendered Person Registration  
18 Identification shall be substantially as follows:

19 SURRENDERED PERSON REGISTRATION

20 IDENTIFICATION

21 (Insert all known information)

22 I, ....., state the following:

23 Surrendered Person's present name: ..... (first) .....  
24 (middle) ..... (last).

25 Surrendered Person's name at birth (if known): .....

1 (first) ..... (middle) ..... (last), .....(birth  
2 date), ..... (city and state of birth), ..... (sex),  
3 ..... (race).

4 Name of guardian father: ..... (first) ..... (middle) .....  
5 (last), ..... (race).

6 Maiden name of guardian mother: ..... (first) .....  
7 (middle) ..... (last), ..... (race).

8 Name of birth mother (if known): ..... (first) .....  
9 (middle) ..... (last) ..... (race).

10 Name of birth father (if known): ..... (first) .....  
11 (middle) ..... (last), .....(race).

12 Name(s) at birth of sibling(s) having a common birth parent  
13 with surrendered person (if known): ..... (first)  
14 ..... (middle) ..... (last), ..... (race), and name of  
15 common birth parent: ..... (first) ..... (middle)  
16 ..... (last), ..... (race).

17 I was surrendered for adoption to: ..... (name of agency).

18 I was surrendered for adoption in ..... (city and state), .....  
19 (approximate date).

20 Other identifying information: .....

21 .....

22 (signature of surrendered person)

23 .....

24 (date) (printed name of person

25 surrendered for adoption)

1 (c-3) The form of the Registration Identification Form for  
2 Surviving Relatives of Deceased Birth Parents shall be  
3 substantially as follows:

4 REGISTRATION IDENTIFICATION FORM

5 FOR SURVIVING RELATIVES OF DECEASED BIRTH PARENTS

6 (Insert all known information)

7 I, ....., state the following:

8 Name of deceased birth parent at time of surrender:

9 Deceased birth parent's date of birth:

10 Deceased birth parent's date of death:

11 Adopted or surrendered person's name at birth (if known):

12 .....(first) ..... (middle) ..... (last), .....(birth  
13 date), ..... (city and state of birth), ..... (sex),  
14 ..... (race).

15 My relationship to the adopted or surrendered person (check  
16 one): (birth parent's non-surrendered child) (birth parent's  
17 sister) (birth parent's brother).

18 If you are a non-surrendered child of the birth parent, provide  
19 name(s) at birth and age(s) of non-surrendered siblings having  
20 a common parent with the birth parent. If more than one  
21 sibling, please give information requested below on reverse  
22 side of this form. If you are a sibling or parent of the birth  
23 parent, provide name(s) at birth and age(s) of the sibling(s)  
24 of the birth parent. If more than one sibling, please give  
25 information requested below on reverse side of this form.

1 Name (First) ..... (middle) ..... (last), .....(birth  
 2 date), ..... (city and state of birth), ..... (sex),  
 3 ..... (race).

4 Name(s) of common parent(s) (first) ..... (middle) .....  
 5 (last), .....(race), (first) ..... (middle) .....  
 6 (last), .....(race).

7 My birth sibling/child of my brother/child of my sister/ was  
 8 surrendered for adoption to ..... (name of agency) City and  
 9 state of agency ..... Date .....(approximate) Other  
 10 identifying information ..... (Please note that you must: (i)  
 11 be at least 21 years of age to register; (ii) submit with your  
 12 registration a certified copy of the birth parent's birth  
 13 certificate; (iii) submit a certified copy of the birth  
 14 parent's death certificate; and (iv) if you are a  
 15 non-surrendered birth sibling or a sibling of the deceased  
 16 birth parent, also submit a certified copy of your birth  
 17 certificate with this registration. No application from a  
 18 surviving relative of a deceased birth parent can be accepted  
 19 if the birth parent filed a Denial of Information Exchange  
 20 prior to his or her death.)

21 .....  
 22 (signature of birth parent's surviving relative)

23 .....  
 24 (date) (printed name of birth  
 25 parent's surviving relative)



1 (c-5) The form of the Registration Identification Form for  
2 Surviving Relatives of Deceased Adopted or Surrendered Persons  
3 shall be substantially as follows:

4 REGISTRATION IDENTIFICATION FORM FOR  
5 SURVIVING RELATIVES OF DECEASED ADOPTED OR SURRENDERED PERSONS  
6 (Insert all known information)

7 I, ....., state the following:

8 Adopted or surrendered person's name at birth (if known):  
9 (first) ..... (middle) ..... (last), .....(birth  
10 date), ..... (city and state of birth), ..... (sex),  
11 ..... (race).

12 Adopted or surrendered person's date of death:

13 My relationship to the deceased adopted or surrendered  
14 person(check one): (adoptive mother) (adoptive father) (adult  
15 child) (surviving spouse).

16 If you are an adult child or surviving spouse of the adopted or  
17 surrendered person, provide name(s) at birth and age(s) of the  
18 children of the adopted or surrendered person. If the adopted  
19 or surrendered person had more than one child, please give  
20 information requested below on reverse side of this form.

21 Name (first) ..... (middle) ..... (last), .....(birth  
22 date), ..... (city and state of birth), ..... (sex),  
23 ..... (race).

24 Name(s) of common parent(s) (first) ..... (middle) .....  
25 (last), .....(race), (first) ..... (middle) .....

1 (last), .....(race).

2 My child/parent/deceased spouse was surrendered for  
3 adoption to .....(name of agency) City and state of agency  
4 ..... Date ..... (approximate) Other identifying  
5 information ..... (Please note that you must: (i) be at  
6 least 21 years of age to register; (ii) submit with your  
7 registration a certified copy of the adopted or surrendered  
8 person's death certificate; (iii) if you are the child of a  
9 deceased adopted or surrendered person, also submit a  
10 certified copy of your birth certificate with this  
11 registration; and (iv) if you are the surviving wife or  
12 husband of a deceased adopted or surrendered person, also  
13 submit a copy of your marriage certificate with this  
14 registration. No application from a surviving relative of a  
15 deceased adopted or surrendered person can be accepted if  
16 the adopted or surrendered person filed a Denial of  
17 Information Exchange prior to his or her death.)

18 .....

19 (signature of adopted or surrendered person's surviving  
20 relative)

21 .....

22 (date)

.....

23 (printed name of adopted  
person's surviving relative)

1 (d) The form of the Information Exchange Authorization  
2 shall be substantially as follows:

3 INFORMATION EXCHANGE AUTHORIZATION

4 I, ....., state that I am the person who completed the  
5 Registration Identification; that I am of the age of .....  
6 years; that I hereby authorize the Department of Public Health  
7 to give to the following person(s) (birth mother ) (birth  
8 father) (birth sibling) (adopted or surrendered person )  
9 (adoptive mother) (adoptive father) (legal guardian of an  
10 adopted or surrendered person) (birth aunt) (birth uncle)  
11 (adult child of a deceased adopted or surrendered person)  
12 (surviving spouse of a deceased adopted or surrendered person)  
13 (all eligible relatives) the following (please check the  
14 information authorized for exchange):

15 [ ] 1. Only my name and last known address.

16 [ ] 2. A copy of my Illinois Adoption Registry  
17 Application.

18 [ ] 3. A non-certified copy of the adopted or  
19 surrendered person's original certificate of live birth  
20 (check only if you are an adopted or surrendered person or  
21 the surviving adult child or surviving spouse of a deceased  
22 adopted or surrendered person).

23 [ ] 4. A copy of my completed medical questionnaire.

24 I am fully aware that I can only be supplied with  
25 information about an individual or individuals who have duly  
26 executed an Information Exchange Authorization that has not

1 been revoked or, if I am an adopted or surrendered person, from  
 2 a birth parent who completed a Birth Parent Preference Form and  
 3 did not prohibit the release of his or her identity to me; that  
 4 I can be contacted by writing to: ..... (own name or name of  
 5 person to contact) (address) (phone number).

6 NOTE: New IARMIE registrants who do not complete a Medical  
 7 Information Exchange Questionnaire and release a copy of their  
 8 questionnaire to at least one Registry applicant must pay a \$15  
 9 registration fee.

10 Dated (insert date).

11 .....  
 12 (signature)

13 (e) The form of the Denial of Information Exchange shall be  
 14 substantially as follows:

15 DENIAL OF INFORMATION EXCHANGE

16 I, ....., state that I am the person who completed the  
 17 Registration Identification; that I am of the age of .....  
 18 years; that I hereby instruct the Department of Public Health  
 19 not to give any identifying information about me to the  
 20 following person(s) (birth mother) (birth father) (birth  
 21 sibling) (adopted or surrendered person) (adoptive mother)  
 22 (adoptive father) (legal guardian of an adopted or surrendered  
 23 person) (birth aunt) (birth uncle) (adult child of a deceased  
 24 adopted or surrendered person) (surviving spouse of a deceased  
 25 adopted or surrendered person) (all eligible relatives).

1 ~~IMPORTANT NOTE: A DENIAL FILED BY A BIRTH PARENT ON OR AFTER~~  
2 ~~JANUARY 1, 2011, SHALL NOT PROHIBIT THE RELEASE OF THE BIRTH~~  
3 ~~PARENT'S IDENTIFYING INFORMATION ON THE ORIGINAL BIRTH~~  
4 ~~CERTIFICATE OF AN ADULT ADOPTED OR SURRENDERED PERSON. BIRTH~~  
5 ~~PARENTS WHO WISH TO PROHIBIT THE RELEASE OF THEIR IDENTIFYING~~  
6 ~~INFORMATION ON THE ORIGINAL BIRTH CERTIFICATE OF AN ADULT~~  
7 ~~ADOPTED OR SURRENDERED PERSON SHALL FILE A BIRTH PARENT~~  
8 ~~PREFERENCE FORM ON OR AFTER JANUARY 1, 2011. DENIALS FILED BY A~~  
9 ~~BIRTH PARENT BEFORE JANUARY 1, 2011, WILL EXPIRE UPON THE DEATH~~  
10 ~~OF THE BIRTH PARENT WITH RESPECT TO ACCESS TO IDENTIFYING~~  
11 ~~INFORMATION ON THE ORIGINAL BIRTH CERTIFICATE RELEASED TO AN~~  
12 ~~ADULT ADOPTED OR SURRENDERED PERSON OR TO A SURVIVING ADULT~~  
13 ~~CHILD OR SURVIVING SPOUSE OF A DECEASED ADOPTED OR SURRENDERED~~  
14 ~~PERSON.~~

15 I do/do not (circle appropriate response) authorize the  
16 Registry to release a copy of my completed Medical Information  
17 Exchange Questionnaire to qualified Registry applicants. NOTE:  
18 New IARMIE registrants who do not complete a Medical  
19 Information Exchange Questionnaire and release a copy of their  
20 questionnaire to at least one Registry applicant must pay a \$15  
21 registration fee. Birth parents filing a Denial of Information  
22 Exchange are advised that, under Illinois law, an adult adopted  
23 person may initiate a search for a birth parent who has filed a  
24 Denial of Information Exchange or Birth Parent Preference Form  
25 on which Option E was selected through the State confidential  
26 intermediary program once 5 years have elapsed since the filing

1 of the Denial of Information Exchange or Birth Parent  
2 Preference Form.

3 Dated (insert date).

4 .....

5 (signature)

6 (f) The form of the Birth Parent Preference Form shall be  
7 substantially as follows:

8 In recognition of the basic right of all persons to access  
9 their birth records, Illinois law now provides for the release  
10 of original birth certificates to adopted and surrendered  
11 persons 21 years of age or older upon request. While many birth  
12 parents are comfortable sharing their identities or initiating  
13 contact with their birth sons and daughters once they have  
14 reached adulthood, Illinois law also recognizes that there may  
15 be unique situations where a birth parent might have a  
16 compelling reason for not wishing to establish contact with a  
17 birth son or birth daughter or for not wishing to release  
18 identifying information that appears on the original birth  
19 certificate of a birth son or birth daughter who has reached  
20 adulthood. The Illinois Adoption Registry and Medical  
21 Information Exchange (IARMIE) has therefore established the  
22 attached ~~this~~ form to allow birth parents ~~whose birth son or~~  
23 ~~daughter was born on or after January 1, 1946,~~ to express their  
24 preferences ~~wishes~~ regarding contact; and, if their birth child  
25 was born on or after January 1, 1946, to express their wishes

1 regarding the sharing of identifying information listed on the  
2 original birth certificate with an adult adopted or surrendered  
3 person who has reached the age of 21 or his or her surviving  
4 relatives.

5 In selecting one of the 5 options below, birth parents  
6 should keep in mind that the decision to deny an adult adopted  
7 or surrendered person access to identifying information on his  
8 or her original birth record and/or information about  
9 genetically-transmitted diseases is an important decision ~~one~~  
10 that may ~~can~~ impact the adopted or surrendered person's life in  
11 many ways. A request for anonymity on this form only pertains  
12 to information that is provided to an adult adopted or  
13 surrendered person or his or her surviving relatives through  
14 the Registry. This will ~~and does~~ not prevent the disclosure of  
15 identifying information that may be available to the adoptee  
16 through his or her adoptive parents and/or other means  
17 available to him or her. Birth parents who would prefer not to  
18 be contacted by their surrendered son or daughter are strongly  
19 urged to complete both the Non-Identifying Information Section  
20 included on the final page of the attached form ~~this document~~  
21 and the Medical Questionnaire in order to provide their  
22 surrendered son or daughter with the background information he  
23 or she ~~their surrendered son or daughter~~ may need to better  
24 understand ~~himself or herself and~~ his or her origins. Birth  
25 parents whose birth son or birth daughter is under 21 years of  
26 age at the time of the completion of this form are reminded

1 that no original birth certificate will be released by the  
2 IARMIE before an adoptee has reached the age of 21.

3 ~~Furthermore, birth parents whose surrendered son or daughter is~~  
4 ~~under 21 years of age at the time of completion of this form~~  
5 ~~are reminded that, since no original birth certificates are~~  
6 ~~released by the IARMIE before an adoptee has reached the age of~~  
7 ~~21, and birth parents are encouraged to take as much time as~~  
8 ~~they need to weigh the options available to them before~~  
9 ~~completing this form.~~ Should you need additional assistance in  
10 completing this form, please contact the agency that handled  
11 the adoption, if applicable, or the Illinois Adoption Registry  
12 and Medical Information Exchange at 877-323-5299 ~~217-557-5159~~.

13 After careful consideration, I, ~~(insert your name) .....~~,  
14 have made the following decision regarding contact with my  
15 birth son/birth daughter, (insert birth son's/birth daughter's  
16 name at birth, if applicable) ....., who was born in (insert  
17 city/town of birth) ..... on (insert date of birth)..... and  
18 the release of my identifying information as it appears on  
19 his/her original birth certificate when he/she reaches the age  
20 of 21, and I have chosen Option ..... (insert A, B, C, D, or E,  
21 as applicable). I realize that this form must be accompanied by  
22 a completed IARMIE application form as well as a Medical  
23 Information Exchange Questionnaire or the \$15 registration  
24 fee. I am also aware that I may revoke this decision at any  
25 time by completing a new Birth Parent Preference Form and  
26 filing it with the IARMIE. I understand that it is my



1 responsibility to update the IARMIE with any changes to contact  
 2 information provided below. I also understand that, while  
 3 preferences regarding the release of identifying information  
 4 through the Registry are binding unless the law should change  
 5 in the future, any selection I have made regarding my preferred  
 6 method of contact is not.

7 .....  
 8 (Signature/Date)

9 (Please insert your signature and today's date above, as well  
 10 as under your chosen option, A, B, C, D, or E below.)

11 Option A. My birth son or birth daughter was born on or after  
 12 January 1, 1946, and I agree to the release of my identifying  
 13 information as it appears on my birth son's/birth daughter's  
 14 original birth certificate, OR my birth son or birth daughter  
 15 was born prior to January 1, 1946. I would welcome direct  
 16 contact with my birth son/birth daughter when he or she has  
 17 reached the age of 21. In addition, before my birth son or  
 18 birth daughter has reached the age of 21 or in the event of his  
 19 or her death, I would welcome contact with the following  
 20 relatives of my birth child (circle all that apply): adoptive  
 21 mother, adoptive father, surviving spouse, surviving adult  
 22 child. ~~and~~ I wish to be contacted at the following mailing  
 23 address, email address or phone number:

24 .....

1 .....  
 2 .....  
 3 .....  
 4 (Signature/Date)

5 Option B. My birth son or birth daughter was born on or after  
 6 January 1, 1946, and I agree to the release of my identifying  
 7 information as it appears on my birth son's/birth daughter's  
 8 original birth certificate, OR my birth son or birth daughter  
 9 was born prior to January 1, 1946. I would welcome contact with  
 10 my birth son/birth daughter when he or she has reached the age  
 11 of 21. In addition, before my birth son or birth daughter has  
 12 reached the age of 21 or in the event of his or her death, I  
 13 would welcome contact with the following relatives of my birth  
 14 child (circle all that apply): adoptive mother, adoptive  
 15 father, surviving spouse, surviving adult child., ~~but~~ I would  
 16 prefer to be contacted through the following person. (Insert  
 17 name and mailing address, email address or phone number of  
 18 chosen contact person.)

19 .....  
 20 .....  
 21 (Signature/Date)

22 Option C. My birth son or birth daughter was born on or after  
 23 January 1, 1946, and I agree to the release of my identifying  
 24 information ~~name~~ as it appears on my birth son's/birth

1 daughter's original birth certificate, OR my birth son or birth  
 2 daughter was born prior to January 1, 1946. I would welcome  
 3 contact with my birth son/birth daughter when he or she has  
 4 reached the age of 21. In addition, before my birth son or  
 5 birth daughter has reached the age of 21 or in the event of his  
 6 or her death, I would welcome contact with the following  
 7 relatives of my birth child (circle all that apply): adoptive  
 8 mother, adoptive father, surviving spouse, surviving adult  
 9 child. ~~but~~ I would prefer to be contacted through the Illinois  
 10 Confidential Intermediary Program ~~confidential intermediary~~  
 11 ~~program~~ (please call 800-526-9022 for additional information)  
 12 or through the agency that handled the adoption. (Insert agency  
 13 name, address and phone number, if applicable.)

14 .....  
 15 .....

16 (Signature/Date)

17 Option D. My birth son or birth daughter was born on or after  
 18 January 1, 1946, and I agree to the release of my identifying  
 19 information ~~name~~ as it appears on my birth son's/birth  
 20 daughter's original birth certificate when he or she has  
 21 reached the age of 21, OR my birth son or birth daughter was  
 22 born prior to January 1, 1946. ~~but~~ I would prefer not to be  
 23 contacted by my birth son/birth daughter or his or her adoptive  
 24 parents or surviving relatives ~~when he or she has reached the~~  
 25 ~~age of 21.~~

1 .....

2 (Signature/Date)

3 Option E. My birth son or birth daughter was born on or after  
4 January 1, 1946, and I wish to prohibit the release of my  
5 (circle ALL applicable options) first name, last name, last  
6 known address, birth son/birth daughter's last name (if last  
7 name listed is same as mine), as they appear on my birth  
8 son's/birth daughter's original birth certificate and do not  
9 wish to be contacted by my birth son/birth daughter when he or  
10 she has reached the age of 21. If there were any special  
11 circumstances that played a role in your decision to remain  
12 anonymous which you would like to share with your birth  
13 son/birth daughter, please list them in the space provided  
14 below (optional).

15 .....

16 .....

17 I understand that, although I have chosen to prohibit the  
18 release of my identity on the non-certified copy of the  
19 original birth certificate released to my birth son/birth  
20 daughter, he or she may request that a court-appointed  
21 confidential intermediary contact me to request updated  
22 medical information and/or confirm my desire to remain  
23 anonymous once 5 years have elapsed since the signing of this  
24 form; at the time of this subsequent search, I wish to be  
25 contacted through the person named below. (Insert in blank area

1 below the name and phone number of the contact person, or leave  
2 it blank if you wish to be contacted directly.) I also  
3 understand that this request for anonymity shall expire upon my  
4 death.

5 .....

6 .....

7 (Signature/Date)

8 NOTE: A copy of this form will be forwarded to your birth son  
9 or birth daughter should he or she file a request for his or  
10 her original birth certificate with the IARMIE. However, if you  
11 have selected Option E, identifying information, per your  
12 specifications above, will be deleted from the copy of this  
13 form forwarded to your birth son or daughter during your  
14 lifetime. In the event that an adopted or surrendered person is  
15 deceased, his or her surviving adult children may request a  
16 copy of the adopted or surrendered person's original birth  
17 certificate providing they have registered with the IARMIE; the  
18 copy of this form and the non-certified copy of the original  
19 birth certificate forwarded to the surviving child of the  
20 adopted or surrendered person shall be redacted per your  
21 specifications on this form during your lifetime.

22 Non-Identifying Information Section

23 I wish to voluntarily provide the following non-identifying  
24 information to my birth son or birth daughter ~~surrendered son~~  
25 ~~or daughter~~:

1 My age at the time of my child's birth was .....

2 My race is best described as: .....

3 My height is: .....

4 My body type is best described as (circle one): slim, average,  
5 muscular, a few extra pounds, or more than a few extra pounds.

6 My natural hair color is/was: .....

7 My eye color is: .....

8 My religion is best described as: .....

9 My ethnic background is best described as: .....

10 My educational level is closest to (circle applicable  
11 response): completed elementary school, graduated from  
12 high school, attended college, earned bachelor's degree,  
13 earned master's degree, earned doctoral degree.

14 My occupation is best described as .....

15 My hobbies include .....

16 My interests include .....

17 My talents include .....

18 In addition to my surrendered son or daughter, I also  
19 am the biological parent of (insert number) ..... boys and  
20 (insert number) ..... girls, of whom (insert number) .....  
21 are still living.

22 The relationship between me and my child's birth mother/birth  
23 father would best be described as (circle appropriate  
24 response): husband and wife, ex-spouses, boyfriend and  
25 girlfriend, casual acquaintances, other (please specify)  
26 .....

1 (g) The form of the Request for a Non-Certified Copy of an  
2 Original Birth Certificate shall be substantially as follows:

3 REQUEST FOR A NON-CERTIFIED COPY OF AN ORIGINAL BIRTH  
4 CERTIFICATE

5 I, (requesting party's full name) ....., hereby request a  
6 non-certified copy of (check appropriate option) ..... my  
7 original birth certificate ..... the original birth  
8 certificate of my deceased adopted or surrendered parent .....  
9 the original birth certificate of my deceased adopted or  
10 surrendered spouse (insert deceased parent's/deceased spouse's  
11 name at adoption) ..... I/my deceased parent/my deceased  
12 spouse was born in (insert city and county of adopted or  
13 surrendered person's birth) ..... on ..... (insert adopted or  
14 surrendered person's date of birth). In the event that one or  
15 both of my/my deceased parent's/my deceased spouse's birth  
16 parents has requested that their identity not be released to  
17 me/to my deceased parent/to my deceased spouse, I wish to  
18 (check appropriate option) ..... a. receive a non-certified  
19 copy of the original birth certificate from which identifying  
20 information pertaining to the birth parent who requested  
21 anonymity has been deleted; or ..... b. I do not wish to  
22 received an altered copy of the original birth certificate.

23 Dated (insert date).

24 .....

25 (signature)

1 (h) Any Information Exchange Authorization, Denial of  
 2 Information Exchange, or Birth Parent Preference Form filed  
 3 with the Registry, or Request for a Non-Certified Copy of an  
 4 Original Birth Certificate filed with the Registry by a  
 5 surviving adult child or surviving spouse of a deceased adopted  
 6 or surrendered person, shall be acknowledged by the person who  
 7 filed it before a notary public, in form substantially as  
 8 follows:

9 State of .....

10 County of .....

11 I, a Notary Public, in and for the said County, in the  
 12 State aforesaid, do hereby certify that .....  
 13 personally known to me to be the same person whose name is  
 14 subscribed to the foregoing certificate of acknowledgement,  
 15 appeared before me in person and acknowledged that (he or she)  
 16 signed such certificate as (his or her) free and voluntary act  
 17 and that the statements in such certificate are true.

18 Given under my hand and notarial seal on (insert date).

19 .....

20 (signature)

21 (i) When the execution of an Information Exchange  
 22 Authorization, Denial of Information Exchange, or Birth Parent  
 23 Preference Form or Request for a Non-Certified Copy of an  
 24 Original Birth Certificate completed by a surviving adult child  
 25 or surviving spouse of a deceased adopted or surrendered person



1 is acknowledged before a representative of an agency, such  
2 representative shall have his signature on said Certificate  
3 acknowledged before a notary public, in form substantially as  
4 follows:

5 State of.....

6 County of.....

7 I, a Notary Public, in and for the said County, in the  
8 State aforesaid, do hereby certify that ..... personally known  
9 to me to be the same person whose name is subscribed to the  
10 foregoing certificate of acknowledgement, appeared before me  
11 in person and acknowledged that (he or she) signed such  
12 certificate as (his or her) free and voluntary act and that the  
13 statements in such certificate are true.

14 Given under my hand and notarial seal on (insert date).

15 .....

16 (signature)

17 (j) When an Illinois Adoption Registry Application,  
18 Information Exchange Authorization, Denial of Information  
19 Exchange, Birth Parent Preference Form, or Request for a  
20 Non-Certified Copy of an Original Birth Certificate completed  
21 by a surviving adult child or surviving spouse of a deceased  
22 adopted or surrendered person is executed in a foreign country,  
23 the execution of such document shall be acknowledged or  
24 affirmed before an officer of the United States consular  
25 services.

1           (k) If the person signing an Information Exchange  
2 Authorization, Denial of Information, Birth Parent Preference  
3 Form, or Request for a Non-Certified Copy of an Original Birth  
4 Certificate completed by a surviving adult child or surviving  
5 spouse of a deceased adopted or surrendered person is in the  
6 military service of the United States, the execution of such  
7 document may be acknowledged before a commissioned officer and  
8 the signature of such officer on such certificate shall be  
9 verified or acknowledged before a notary public or by such  
10 other procedure as is then in effect for such division or  
11 branch of the armed forces.

12           (1) An adopted or surrendered person who completes a  
13 Request For a Non-Certified Copy of the Original Birth  
14 Certificate shall meet the same filing requirements and pay the  
15 same filing fees as a non-adopted person seeking to obtain a  
16 copy of his or her original birth certificate.

17           (Source: P.A. 96-895, eff. 5-21-10.)

18           (750 ILCS 50/18.3a) (from Ch. 40, par. 1522.3a)

19           Sec. 18.3a. Confidential intermediary.

20           (a) General purposes. Notwithstanding any other provision  
21 of this Act, any adopted or surrendered person 21 years of age  
22 or over, any adoptive parent or legal guardian of an adopted or  
23 surrendered person under the age of 21, or any birth parent of  
24 an adopted or surrendered person who is 21 years of age or over  
25 may petition the court in any county in the State of Illinois

1 for appointment of a confidential intermediary as provided in  
2 this Section for the purpose of exchanging medical information  
3 with one or more mutually consenting biological relatives,  
4 obtaining identifying information about one or more mutually  
5 consenting biological relatives, or arranging contact with one  
6 or more mutually consenting biological relatives.  
7 Additionally, in cases where an adopted or surrendered person  
8 is deceased, an adult child of the adopted or surrendered  
9 person or his or her adoptive parents or surviving spouse may  
10 file a petition under this Section and in cases where the birth  
11 parent is deceased, an adult birth sibling of the adopted or  
12 surrendered person or of the deceased birth parent may file a  
13 petition under this Section for the purpose of exchanging  
14 medical information with one or more mutually consenting  
15 biological relatives of the adopted or surrendered person,  
16 obtaining identifying information about one or more mutually  
17 consenting biological relatives of the adopted or surrendered  
18 person, or arranging contact with one or more mutually  
19 consenting biological relatives of the adopted or surrendered  
20 person. Beginning January 1, 2006, any adopted or surrendered  
21 person 21 years of age or over; any adoptive parent or legal  
22 guardian of an adopted or surrendered person under the age of  
23 21; any birth parent, birth sibling, birth aunt, or birth uncle  
24 of an adopted or surrendered person over the age of 21; any  
25 surviving child, adoptive parent, or surviving spouse of a  
26 deceased adopted or surrendered person who wishes to petition

1 the court for the appointment of a confidential intermediary  
2 shall be required to accompany their petition with proof of  
3 registration with the Illinois Adoption Registry and Medical  
4 Information Exchange.

5 (b) Petition. Upon petition by an adopted or surrendered  
6 person 21 years of age or over (an "adult adopted or  
7 surrendered person"), an adoptive parent or legal guardian of  
8 an adopted or surrendered person under the age of 21, or a  
9 birth parent of an adopted or surrendered person who is 21  
10 years of age or over, the court shall appoint a confidential  
11 intermediary. Upon petition by an adult child, adoptive parent  
12 or surviving spouse of an adopted or surrendered person who is  
13 deceased, by an adult birth sibling of an adopted or  
14 surrendered person whose common birth parent is deceased and  
15 whose adopted or surrendered birth sibling is 21 years of age  
16 or over, or by an adult sibling of a birth parent who is  
17 deceased, and whose surrendered child is 21 years of age or  
18 over, the court may appoint a confidential intermediary if the  
19 court finds that the disclosure is of greater benefit than  
20 nondisclosure. The petition shall state which biological  
21 relative or relatives are being sought and shall indicate if  
22 the petitioner wants to do any one or more of the following:  
23 exchange medical information with the biological relative or  
24 relatives, obtain identifying information from the biological  
25 relative or relatives, or to arrange contact with the  
26 biological relative.

1           (c) Order. The order appointing the confidential  
2 intermediary shall allow that intermediary to conduct a search  
3 for the sought-after relative by accessing those records  
4 described in subsection (g) of this Section.

5           (d) Fees and expenses. The court shall condition the  
6 appointment of the confidential intermediary on the  
7 petitioner's payment of the intermediary's fees and expenses in  
8 advance of the commencement of the work of the confidential  
9 intermediary. However, no fee shall be charged if the  
10 petitioner is an adult adopted or surrendered person and the  
11 sought-after relative is a birth parent who filed a Denial with  
12 the Registry prior to January 1, 2011, or filed a Birth Parent  
13 Preference Form on which Option E was selected after January 1,  
14 2011 and more than 5 years have transpired since the birth  
15 parent filed the Denial of Information Exchange or Birth Parent  
16 Preference Form on which Option E was selected.

17           (e) Eligibility of intermediary. The court may appoint as  
18 confidential intermediary any person certified by the  
19 Department of Children and Family Services as qualified to  
20 serve as a confidential intermediary. Certification shall be  
21 dependent upon the confidential intermediary completing a  
22 course of training including, but not limited to, applicable  
23 federal and State privacy laws.

24           (f) Confidential Intermediary Council. There shall be  
25 established under the Department of Children and Family  
26 Services a Confidential Intermediary Advisory Council. One

1 member shall be an attorney representing the Attorney General's  
2 Office appointed by the Attorney General. One member shall be a  
3 currently certified confidential intermediary appointed by the  
4 Director of the Department of Children and Family Services. The  
5 Director shall also appoint 5 additional members. When making  
6 those appointments, the Director shall consider advocates for  
7 adopted persons, adoptive parents, birth parents, lawyers who  
8 represent clients in private adoptions, lawyers specializing  
9 in privacy law, and representatives of agencies involved in  
10 adoptions. The Director shall appoint one of the 7 members as  
11 the chairperson. An attorney from the Department of Children  
12 and Family Services and the person directly responsible for  
13 administering the confidential intermediary program shall  
14 serve as ex-officio, non-voting advisors to the Council.  
15 Council members shall serve at the discretion of the Director  
16 and shall receive no compensation other than reasonable  
17 expenses approved by the Director. The Council shall meet no  
18 less than twice yearly and shall meet at least once yearly with  
19 the Registry Advisory Council, and shall make recommendations  
20 to the Director regarding the development of rules, procedures,  
21 and forms that will ensure efficient and effective operation of  
22 the confidential intermediary process, including:

23 (1) Standards for certification for confidential  
24 intermediaries.

25 (2) Oversight of methods used to verify that  
26 intermediaries are complying with the appropriate laws.

1           (3) Training for confidential intermediaries,  
2 including training with respect to federal and State  
3 privacy laws.

4           (4) The relationship between confidential  
5 intermediaries and the court system, including the  
6 development of sample orders defining the scope of the  
7 intermediaries' access to information.

8           (5) Any recent violations of policy or procedures by  
9 confidential intermediaries and remedial steps, including  
10 decertification, to prevent future violations.

11           (g) Access. Subject to the limitations of subsection (i)  
12 of this Section, the confidential intermediary shall have  
13 access to vital records or a comparable public entity that  
14 maintains vital records in another state in accordance with  
15 that state's laws, maintained by the Department of Public  
16 Health and its local designees for the maintenance of vital  
17 records or a comparable public entity that maintains vital  
18 records in another state in accordance with that state's laws  
19 and all records of the court or any adoption agency, public or  
20 private, as limited in this Section, which relate to the  
21 adoption or the identity and location of an adopted or  
22 surrendered person, of an adult child or surviving spouse of a  
23 deceased adopted or surrendered person, or of a birth parent,  
24 birth sibling, or the sibling of a deceased birth parent. The  
25 confidential intermediary shall not have access to any personal  
26 health information protected by the Standards for Privacy of

1 Individually Identifiable Health Information adopted by the  
2 U.S. Department of Health and Human Services under the Health  
3 Insurance Portability and Accountability Act of 1996 unless the  
4 confidential intermediary has obtained written consent from  
5 the person whose information is being sought by an adult  
6 adopted or surrendered person or, if that person is a minor  
7 child, that person's parent or guardian. Confidential  
8 intermediaries shall be authorized to inspect confidential  
9 relinquishment and adoption records. The confidential  
10 intermediary shall not be authorized to access medical records,  
11 financial records, credit records, banking records, home  
12 studies, attorney file records, or other personal records. In  
13 cases where a birth parent is being sought, an adoption agency  
14 shall inform the confidential intermediary of any statement  
15 filed pursuant to Section 18.3, hereinafter referred to as "the  
16 18.3 statement", indicating a desire of the surrendering birth  
17 parent to have identifying information shared or to not have  
18 identifying information shared. If there was a clear statement  
19 of intent by the sought-after birth parent not to have  
20 identifying information shared, the confidential intermediary  
21 shall discontinue the search and inform the petitioning party  
22 of the sought-after relative's intent unless the birth parent  
23 filed the 18.3 statement prior to the effective date of this  
24 amendatory Act of the 96th General Assembly and more than 5  
25 years have elapsed since the filing of the 18.3 statement. If  
26 the adult adopted or surrendered person is the subject of an



1 18.3 statement indicating a desire not to establish contact  
2 which was filed more than 5 years prior to the search request,  
3 the confidential intermediary shall confirm the petitioner's  
4 desire to continue the search. Information provided to the  
5 confidential intermediary by an adoption agency shall be  
6 restricted to the full name, date of birth, place of birth,  
7 last known address, last known telephone number of the  
8 sought-after relative or, if applicable, of the children or  
9 siblings of the sought-after relative, and the 18.3 statement.

10 (h) Adoption agency disclosure of medical information. If  
11 the petitioner is an adult adopted or surrendered person or the  
12 adoptive parent of a minor and if the petitioner has signed a  
13 written authorization to disclose personal medical  
14 information, an adoption agency disclosing information to a  
15 confidential intermediary shall disclose available medical  
16 information about the adopted or surrendered person from birth  
17 through adoption.

18 (i) Duties of confidential intermediary in conducting a  
19 search. In conducting a search under this Section, the  
20 confidential intermediary shall first confirm that there is no  
21 Denial of Information Exchange on file with the Illinois  
22 Adoption Registry. If the petitioner is an adult child of an  
23 adopted or surrendered person who is deceased, the confidential  
24 intermediary shall additionally confirm that the adopted or  
25 surrendered person did not file a Denial of Information  
26 Exchange or a Birth Parent Preference Form with Option E

1 selected with the Illinois Adoption Registry during his or her  
2 life. If there is a Denial on file with the Registry, the  
3 confidential intermediary must discontinue the search unless  
4 the petitioner is an adult adopted or surrendered person and  
5 the sought-after birth relative filed the Denial 5 years or  
6 more prior to the search or the birth parent has not been the  
7 object of a search through the State confidential intermediary  
8 program for 10 or more years. If the petitioner is an adult  
9 adopted or surrendered person and there is a Birth Parent  
10 Preference Form on file with the Registry and the birth parent  
11 who completed the form selected Option E, the confidential  
12 intermediary must discontinue the search unless 5 years or more  
13 have elapsed since the filing of the Birth Parent Preference  
14 Form. If the petitioner is an adult birth sibling of an adopted  
15 or surrendered person or an adult sibling of a birth parent who  
16 is deceased, the confidential intermediary shall additionally  
17 confirm that the birth parent did not file a Denial of  
18 Information Exchange or a Birth Parent Preference Form with  
19 Option E selected with the Registry during his or her life. If  
20 the confidential intermediary learns that a sought-after birth  
21 parent signed an 18.3 statement indicating his or her intent  
22 not to have identifying information shared, and did not later  
23 file an Information Exchange Authorization or a Birth Parent  
24 Preference Form with the Registry, the confidential  
25 intermediary shall discontinue the search and inform the  
26 petitioning party of the birth parent's intent, unless the

1 petitioner is an adult adopted or surrendered person and 5  
2 years or more have elapsed since the birth parent signed the  
3 statement indicating his or her intent not to have identifying  
4 information shared. In cases where the birth parent filed a  
5 Denial of Information Exchange or Birth Parent Preference Form  
6 where Option E was selected, or statement indicating his or her  
7 intent not to have identifying information shared less than 5  
8 years prior to the search request and the petitioner is an  
9 adult adopted or surrendered person, the confidential  
10 intermediary shall inform the petitioner of the need to  
11 discontinue the search until 5 years have elapsed since the  
12 Denial of Information Exchange or Birth Parent Preference Form  
13 where Option E was selected, or statement was filed; in cases  
14 where a birth parent was previously the subject of a search  
15 through the State confidential intermediary program, the  
16 confidential intermediary shall inform the petitioner of the  
17 need to discontinue the search until 10 years or more have  
18 elapsed since the initial search was closed. In cases where a  
19 birth parent has been the object of 2 searches through the  
20 State confidential intermediary program, no subsequent search  
21 for the birth parent shall be authorized absent a court order  
22 to the contrary.

23 In conducting a search under this Section, the confidential  
24 intermediary shall attempt to locate the relative or relatives  
25 from whom the petitioner has requested information. If the  
26 sought-after relative is deceased or cannot be located after a

1 diligent search, the confidential intermediary may contact  
2 other adult relatives of the sought-after relative.

3 The confidential intermediary shall contact a sought-after  
4 relative on behalf of the petitioner in a manner that respects  
5 the sought-after relative's privacy and shall inform the  
6 sought-after relative of the petitioner's request for medical  
7 information, identifying information or contact as stated in  
8 the petition. Based upon the terms of the petitioner's request,  
9 the confidential intermediary shall contact a sought-after  
10 relative on behalf of the petitioner and inform the  
11 sought-after relative of the following options:

12 (1) The sought-after relative may totally reject one or  
13 all of the requests for medical information, identifying  
14 information or contact. The sought-after relative shall be  
15 informed that they can provide a medical questionnaire to  
16 be forwarded to the petitioner without releasing any  
17 identifying information. The confidential intermediary  
18 shall inform the petitioner of the sought-after relative's  
19 decision to reject the sharing of information or contact.

20 (2) The sought-after relative may consent to  
21 completing a medical questionnaire only. In this case, the  
22 confidential intermediary shall provide the questionnaire  
23 and ask the sought-after relative to complete it. The  
24 confidential intermediary shall forward the completed  
25 questionnaire to the petitioner and inform the petitioner  
26 of the sought-after relative's desire to not provide any

1 additional information.

2 (3) The sought-after relative may communicate with the  
3 petitioner without having his or her identity disclosed. In  
4 this case, the confidential intermediary shall arrange the  
5 desired communication in a manner that protects the  
6 identity of the sought-after relative. The confidential  
7 intermediary shall inform the petitioner of the  
8 sought-after relative's decision to communicate but not  
9 disclose his or her identity.

10 (4) The sought-after ~~sought-after~~ relative may consent  
11 to initiate contact with the petitioner. If both the  
12 petitioner and the sought-after relative or relatives are  
13 eligible to register with the Illinois Adoption Registry,  
14 the confidential intermediary shall provide the necessary  
15 application forms and request that the sought-after  
16 relative register with the Illinois Adoption Registry. If  
17 either the petitioner or the sought-after relative or  
18 relatives are ineligible to register with the Illinois  
19 Adoption Registry, the confidential intermediary shall  
20 obtain written consents from both parties that they wish to  
21 disclose their identities to each other and to have contact  
22 with each other.

23 (j) Oath. The confidential intermediary shall sign an oath  
24 of confidentiality substantially as follows: "I, .....,  
25 being duly sworn, on oath depose and say: As a condition of  
26 appointment as a confidential intermediary, I affirm that:

1 (1) I will not disclose to the petitioner, directly or  
2 indirectly, any confidential information except in a  
3 manner consistent with the law.

4 (2) I recognize that violation of this oath subjects me  
5 to civil liability and to a potential finding of contempt  
6 of court. ....

7 SUBSCRIBED AND SWORN to before me, a Notary Public, on (insert  
8 date)  
9 ....."

10 (k) Sanctions.

11 (1) Any confidential intermediary who improperly  
12 discloses confidential information identifying a  
13 sought-after relative shall be liable to the sought-after  
14 relative for damages and may also be found in contempt of  
15 court.

16 (2) Any person who learns a sought-after relative's  
17 identity, directly or indirectly, through the use of  
18 procedures provided in this Section and who improperly  
19 discloses information identifying the sought-after  
20 relative shall be liable to the sought-after relative for  
21 actual damages plus minimum punitive damages of \$10,000.

22 (3) The Department shall fine any confidential  
23 intermediary who improperly discloses confidential  
24 information in violation of item (1) or (2) of this  
25 subsection (k) an amount up to \$2,000 per improper  
26 disclosure. This fine does not affect civil liability under

1 item (2) of this subsection (k). The Department shall  
2 deposit all fines and penalties collected under this  
3 Section into the Illinois Adoption Registry and Medical  
4 Information Fund.

5 (l) Death of person being sought. Notwithstanding any other  
6 provision of this Act, if the confidential intermediary  
7 discovers that the person being sought has died, he or she  
8 shall report this fact to the court, along with a copy of the  
9 death certificate. If the sought-after relative is a birth  
10 parent, the confidential intermediary shall also forward a copy  
11 of the birth parent's death certificate, if available, to the  
12 Registry for inclusion in the Registry file.

13 (m) Any confidential information obtained by the  
14 confidential intermediary during the course of his or her  
15 search shall be kept strictly confidential and shall be used  
16 for the purpose of arranging contact between the petitioner and  
17 the sought-after birth relative. At the time the case is  
18 closed, all identifying information shall be returned to the  
19 court for inclusion in the impounded adoption file.

20 (n) If the petitioner is an adopted or surrendered person  
21 21 years of age or over or the adoptive parent or legal  
22 guardian of an adopted or surrendered person under the age of  
23 21, any non-identifying information, as defined in Section  
24 18.4, that is ascertained during the course of the search may  
25 be given in writing to the petitioner at any time during the  
26 search before the case is closed.

1           (o) Except as provided in subsection (k) of this Section,  
2 no liability shall accrue to the State, any State agency, any  
3 judge, any officer or employee of the court, any certified  
4 confidential intermediary, or any agency designated to oversee  
5 confidential intermediary services for acts, omissions, or  
6 efforts made in good faith within the scope of this Section.

7           (p) An adoption agency that has received a request from a  
8 confidential intermediary for the full name, date of birth,  
9 last known address, or last known telephone number of a  
10 sought-after relative pursuant to subsection (g) of Section  
11 18.3a, or for medical information regarding a sought-after  
12 relative pursuant to subsection (h) of Section 18.3a, must  
13 satisfactorily comply with this court order within a period of  
14 45 days. The court shall order the adoption agency to reimburse  
15 the petitioner in an amount equal to all payments made by the  
16 petitioner to the confidential intermediary, and the adoption  
17 agency shall be subject to a civil monetary penalty of \$1,000  
18 to be paid to the Department of Children and Family Services.  
19 Following the issuance of a court order finding that the  
20 adoption agency has not complied with Section 18.3, the  
21 adoption agency shall be subject to a monetary penalty of \$500  
22 per day for each subsequent day of non-compliance. Proceeds  
23 from such fines shall be utilized by the Department of Children  
24 and Family Services to subsidize the fees of petitioners as  
25 referenced in subsection (d) of this Section.

26           (q) Provide information to eligible petitioner. The



1 confidential intermediary may provide to eligible petitioners  
2 as described in subsections (a) and (b) of this Section, the  
3 name of the child welfare agency which had legal custody of the  
4 surrendered person or responsibility for placing the  
5 surrendered person and any available contact information for  
6 such agency. In addition, the confidential intermediary may  
7 provide to such petitioners the name of the state in which the  
8 surrender occurred or in which the adoption was finalized.

9 Any reimbursements and fines, notwithstanding any  
10 reimbursement directly to the petitioner, paid under this  
11 subsection are in addition to other remedies a court may  
12 otherwise impose by law.

13 The Department of Children and Family Services shall submit  
14 reports to the Confidential Intermediary Advisory Council by  
15 July 1 and January 1 of each year in order to report the  
16 penalties assessed and collected under this subsection, the  
17 amounts of related deposits into the DCFS Children's Services  
18 Fund, and any expenditures from such deposits.

19 (Source: P.A. 96-661, eff. 8-25-09; 96-895, eff. 5-21-10.)

20 (750 ILCS 50/18.6) (from Ch. 40, par. 1522.6)

21 Sec. 18.6. Registry fees. The Department of Public Health  
22 shall levy a fee for each registrant under Sections 18.05  
23 through 18.5. A \$15 fee shall be charged for registering with  
24 the Illinois Adoption Registry and Medical Information  
25 Exchange. However, this fee shall be waived for all adopted or

1 surrendered persons, surviving children and spouses of  
2 deceased adopted persons, adoptive parents, legal guardians,  
3 birth parents, birth aunts, birth uncles, and birth siblings  
4 who complete a Medical Information Exchange Questionnaire at  
5 the time of registration and authorize its release to specified  
6 registered parties, and for adoptive parents registering  
7 within 12 months of the finalization of the adoption. All  
8 persons who were registered with the Illinois Adoption Registry  
9 prior to the effective date of this amendatory Act of 1999 and  
10 who wish to update their registration may do so without charge.  
11 No charge of any kind shall be made for the withdrawal of any  
12 form provided in Section 18.2.

13 (Source: P.A. 96-895, eff. 5-21-10.)

14 Section 99. Effective date. This Act takes effect upon  
15 becoming law.