



Rep. Sara Feigenholtz

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1 AMENDMENT TO HOUSE BILL 1445

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 1445 by replacing  
3 everything after the enacting clause with the following:

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.

1           (b) A certificate of adoption or a certified copy of  
2           the order of adoption entered in a court of competent  
3           jurisdiction of any other state or country declaring  
4           adopted a child born in the State of Illinois, together  
5           with the information necessary to identify the original  
6           certificate of birth and to establish the new certificate  
7           of birth; except that a new certificate of birth shall not  
8           be established if so requested by the court ordering the  
9           adoption, the adoptive parents, or the adopted person.

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

20          (d) An affidavit by a physician that he has performed  
21          an operation on a person, and that by reason of the  
22          operation the sex designation on such person's birth record  
23          should be changed. The State Registrar of Vital Records may  
24          make any investigation or require any further information  
25          he deems necessary.

26          Each request for a new certificate of birth shall be

1 accompanied by a fee of \$15 and entitles the applicant to one  
2 certification or certified copy of the new certificate. If the  
3 request is for additional copies, it shall be accompanied by a  
4 fee of \$2 for each additional certification or certified copy.

5 (2) When a new certificate of birth is established, the  
6 actual place and date of birth shall be shown; provided, in the  
7 case of adoption of a person born in this State by parents who  
8 were residents of this State at the time of the birth of the  
9 adopted person, the place of birth may be shown as the place of  
10 residence of the adoptive parents at the time of such person's  
11 birth, if specifically requested by them, and any new  
12 certificate of birth established prior to the effective date of  
13 this amendatory Act may be corrected accordingly if so  
14 requested by the adoptive parents or the adopted person when of  
15 legal age. The social security numbers of the parents shall not  
16 be recorded on the certificate of birth. The social security  
17 numbers may only be used for purposes allowed under federal  
18 law. The new certificate shall be substituted for the original  
19 certificate of birth:

20 (a) Thereafter, the original certificate and the  
21 evidence of adoption, paternity, legitimation, or sex  
22 change shall not be subject to inspection or certification  
23 except upon order of the circuit court or as provided by  
24 regulation. If the new certificate was issued subsequent to  
25 an adoption, the original certificate shall not be subject  
26 to inspection until the adopted person has reached the age

1       of 21; thereafter, the original certificate shall be made  
2       available as provided by Section 18.1b of the Adoption Act.

3           (b) Upon receipt of notice of annulment of adoption,  
4       the original certificate of birth shall be restored to its  
5       place in the files, and the new certificate and evidence  
6       shall not be subject to inspection or certification except  
7       upon order of the circuit court.

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

16          (4) When a new certificate of birth is established by the  
17      State Registrar of Vital Records, all copies of the original  
18      certificate of birth in the custody of any custodian of  
19      permanent local records in this State shall be transmitted to  
20      the State Registrar of Vital Records as directed, and shall be  
21      sealed from inspection.

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

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

1           Section 10. The Adoption Act is amended by changing  
2 Sections 18.06, 18.1, 18.1a, 18.1b, 18.2, 18.3a, and 18.6 as  
3 follows:

4           (750 ILCS 50/18.06)

5           Sec. 18.06. Definitions. When used in Sections 18.05  
6 through Section 18.6, for the purposes of the Registry:

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

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

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

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

15           "Agency" means a public child welfare agency or a licensed  
16 child welfare agency.

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

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

25           "Birth mother" means the biological mother of an adopted or

1 surrendered person.

2 "Birth parent" means a birth mother or birth father of an  
3 adopted or surrendered person.

4 "Birth Parent Preference Form" means the form prepared by  
5 the Department of Public Health pursuant to Section 18.2  
6 completed by a birth parent registrant and filed with the  
7 Registry that indicates the birth parent's preferences  
8 regarding contact and, if applicable, the release of his or her  
9 identifying information on the non-certified copy of the  
10 original birth certificate released to an adult adopted or  
11 surrendered person or to the surviving adult child or surviving  
12 spouse of a deceased adopted or surrendered person who has  
13 filed a Request for a Non-Certified Copy of an Original Birth  
14 Certificate.

15 "Birth relative" means a birth mother, birth father, birth  
16 sibling, birth aunt, or birth uncle.

17 "Birth sibling" means the adult full or half sibling of an  
18 adopted or surrendered person.

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

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

24 "Denial of Information Exchange" means an affidavit  
25 completed by a registrant with the Illinois Adoption Registry  
26 and Medical Information Exchange denying the release of

1 identifying information which has been filed with the Registry.

2 "Information Exchange Authorization" means an affidavit  
3 completed by a registrant with the Illinois Adoption Registry  
4 and Medical Information Exchange authorizing the release of  
5 identifying information which has been filed with the Registry.

6 "Medical Information Exchange Questionnaire" means the  
7 medical history questionnaire completed by a registrant of the  
8 Illinois Adoption Registry and Medical Information Exchange.

9 "Non-certified Copy of the Original Birth Certificate"  
10 means a non-certified copy of the original certificate of live  
11 birth of an adult adopted or surrendered person who was born in  
12 Illinois.

13 "Proof of death" means a death certificate.

14 "Registrant" or "Registered Party" means a birth parent,  
15 birth sibling, birth aunt, birth uncle, adopted or surrendered  
16 person 21 years of age or over, adoptive parent or legal  
17 guardian of an adopted or surrendered person under the age of  
18 21, or adoptive parent, surviving spouse, or adult child of a  
19 deceased adopted or surrendered person who has filed an  
20 Illinois Adoption Registry Application or Registration  
21 Identification Form with the Registry.

22 "Registry" means the Illinois Adoption Registry and  
23 Medical Information Exchange.

24 "Request for a Non-Certified Copy of an Original Birth  
25 Certificate" means an affidavit completed by an adult adopted  
26 or surrendered person or by the surviving adult child or

1 surviving spouse of a deceased adopted or surrendered person  
2 and filed with the Registry requesting a non-certified copy of  
3 an adult adopted or surrendered person's original certificate  
4 of live birth in Illinois.

5 "Surrendered person" means a person whose parents' rights  
6 have been surrendered or terminated but who has not been  
7 adopted.

8 "Surviving spouse" means the wife or husband of a deceased  
9 adopted or surrendered person who is over the age of 21 and who  
10 has one or more biological children under the age of 21.

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

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

17 (750 ILCS 50/18.1) (from Ch. 40, par. 1522.1)

18 Sec. 18.1. Disclosure of identifying information.

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

25 (1) The name and last known address of the consenting



1 person or persons.

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

4 (3) A non-certified copy of the original birth  
5 certificate of an adult adopted or surrendered person.

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

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

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

1 Exchange.

2 (e) A birth aunt or birth uncle who has submitted birth  
3 certificates for himself or herself and for a deceased birth  
4 parent naming at least one common biological parent as well as  
5 proof of death for the deceased birth parent and such birth  
6 parent did not file a Denial of Information Exchange or a Birth  
7 Parent Preference Form on which Option E was selected with the  
8 Registry prior to his or her death may file a Registration  
9 Identification Form and an Information Exchange Authorization  
10 or a Denial of Information Exchange.

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

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

1           (h) Any surviving spouse of a deceased adopted or  
2 surrendered person 21 years of age or over who has submitted  
3 proof of death for the deceased adopted or surrendered person  
4 and such adopted or surrendered person did not file a Denial of  
5 Information Exchange with the Registry prior to his or her  
6 death as well as a birth certificate naming themselves and the  
7 adopted or surrendered person as the parents of a minor child  
8 under the age of 21 may file a Registration Identification Form  
9 and an Information Exchange Authorization or a Denial of  
10 Information Exchange.

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

20           (j) The Department of Public Health shall supply to the  
21 adopted or surrendered person or his or her adoptive parents,  
22 legal guardians, adult children or surviving spouse, and to the  
23 birth parents identifying information only if both the adopted  
24 or surrendered person, or one of his or her adoptive parents,  
25 legal guardians, adult children or his or her surviving spouse,  
26 and the birth parents have filed with the Registry an

1 Information Exchange Authorization or a Birth Parent  
2 Preference Form on which Option A, B, or C was selected and the  
3 information at the Registry indicates that the consenting  
4 adopted or surrendered person, the child of the consenting  
5 adoptive parents or legal guardians, the parent of the  
6 consenting adult child of the adopted or surrendered person, or  
7 the deceased wife or husband of the consenting surviving spouse  
8 is the child of the consenting birth parents, except  
9 identifying information that appears on a non-certified copy of  
10 an original birth certificate may be provided to an adult  
11 adopted or surrendered person or to the surviving adult child  
12 or surviving spouse of a deceased adopted or surrendered person  
13 pursuant to the procedures outlined in Section 18.1b(e) of this  
14 Act.

15 The Department of Public Health shall supply to adopted or  
16 surrendered persons who are birth siblings identifying  
17 information only if both siblings have filed with the Registry  
18 an Information Exchange Authorization and the information at  
19 the Registry indicates that the consenting siblings have one or  
20 both birth parents in common. Identifying information shall be  
21 supplied to consenting birth siblings who were adopted or  
22 surrendered if any such sibling is 21 years of age or over.  
23 Identifying information shall be supplied to consenting birth  
24 siblings who were not adopted or surrendered if any such  
25 sibling is 21 years of age or over and has proof of death of the  
26 common birth parent and such birth parent did not file a Denial

1 of Information Exchange or a Birth Parent Preference Form on  
2 which Option E was selected with the Registry prior to his or  
3 her death.

4 (k) The Department of Public Health shall supply to the  
5 adopted or surrendered person or his or her adoptive parents,  
6 legal guardians, adult children or surviving spouse, and to a  
7 birth aunt identifying information only if both the adopted or  
8 surrendered person or one of his or her adoptive parents, legal  
9 guardians, adult children or his or her surviving spouse, and  
10 the birth aunt have filed with the Registry an Information  
11 Exchange Authorization and the information at the Registry  
12 indicates that the consenting adopted or surrendered person, or  
13 the child of the consenting adoptive parents or legal  
14 guardians, or the parent of the consenting adult child, or the  
15 deceased wife or husband of the consenting surviving spouse of  
16 the adopted or surrendered person is or was the child of the  
17 brother or sister of the consenting birth aunt.

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

1 the child of the consenting adoptive parents or legal  
2 guardians, or the parent of the consenting adult child, or the  
3 deceased wife or husband of the consenting surviving spouse of  
4 the adopted or surrendered person is or was the child of the  
5 brother or sister of the consenting birth uncle.

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

21 (n) Identifying information ascertained from the Registry  
22 shall be confidential and may be disclosed only (1) upon a  
23 Court Order, which order shall name the person or persons  
24 entitled to the information, or (2) to a registrant who is the  
25 subject of an Information Exchange Authorization that was  
26 completed by another registrant and filed with the Illinois

1 Adoption Registry and Medical Information Exchange, or (3) as  
2 authorized under subsection (h) of Section 18.3 of this Act, or  
3 (4) pursuant to the procedures outlined in Section 18.1b(e) of  
4 this Act. Any person who willfully provides unauthorized  
5 disclosure of any information filed with the Registry or who  
6 knowingly or intentionally files false information with the  
7 Registry shall be guilty of a Class A misdemeanor and shall be  
8 liable for damages.

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

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

16 (750 ILCS 50/18.1a)

17 Sec. 18.1a. Registry matches.

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

24 (i) an adult adopted or surrendered person and one of  
25 his or her birth relatives who have both filed an

1 applicable Information Exchange Authorization specifying  
2 the other consenting party with the Registry, if  
3 information available to the Registry confirms that the  
4 consenting adopted or surrendered person is biologically  
5 related to 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 (11) In cases where the Illinois Department of Public  
19 Health is unable to locate the original birth certificate  
20 of an adult adopted person who was born prior to January 1,  
21 1946, and is therefore unable to provide the adopted person  
22 or his or her surviving spouse or adult child with a  
23 non-certified copy of the adopted person's original birth  
24 certificate pursuant to the procedures outlined in this  
25 Section, any licensed Illinois child welfare agency which  
26 possesses identifying information pertaining to the birth

1       parent or parents of the adult adopted person shall release  
2       the first and last names of the birth parent or parents of  
3       the adult adopted person to him or her or to his or her  
4       surviving spouse or adult child upon written request  
5       provided that:

6               (A) the written request for identifying  
7               information is accompanied by a letter from the  
8               Illinois Department of Public Health attesting to the  
9               fact that the adult adopted person's original birth  
10              certificate could not be located after a search; and

11              (B) the Illinois amended birth certificate for the  
12              adult adopted person either indicates that he or she  
13              was born in Illinois or provides no indication as to  
14              the adopted person's state of birth.

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

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

24               (750 ILCS 50/18.2) (from Ch. 40, par. 1522.2)

25               Sec. 18.2. Forms.

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

7 BIRTH PARENT REGISTRATION IDENTIFICATION

8 (Insert all known information)

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

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

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

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

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

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

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

1 Other identifying information: .....

2 .....

3 (Signature of parent)

4 .....  
 5 (date) (printed name of parent)

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

8 ADOPTED PERSON  
 9 REGISTRATION IDENTIFICATION  
 10 (Insert all known information)

11 I, ....., state the following:

12 Adopted Person's present name: ..... (first) .....  
 13 (middle) ..... (last).

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

17 Name of adoptive father: ..... (first) ..... (middle) .....  
 18 (last), ..... (race).

19 Maiden name of adoptive mother: ..... (first) .....  
 20 (middle) ..... (last), ..... (race).

21 Name of birth mother (if known): ..... (first) .....  
 22 (middle) ..... (last), ..... (race).

23 Name of birth father (if known): ..... (first) .....  
 24 (middle) ..... (last), ..... (race).

25 Name(s) at birth of sibling(s) having a common birth parent

1 with adoptee (if known): ..... (first) ..... (middle)  
 2 ..... (last), ..... (race), and name of common birth  
 3 parent: ..... (first) ..... (middle) ..... (last),  
 4 ..... (race).

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

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

7 I was adopted in ..... (city and state), ..... (approximate  
 8 date).

9 Other identifying information: .....

10 .....  
 11 (signature of adoptee)  
 12 .....  
 13 (date) (printed name of adoptee)

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

16 SURRENDERED PERSON REGISTRATION

17 IDENTIFICATION

18 (Insert all known information)

19 I, ....., state the following:

20 Surrendered Person's present name: ..... (first) .....  
 21 (middle) ..... (last).

22 Surrendered Person's name at birth (if known): .....  
 23 (first) ..... (middle) ..... (last), .....(birth  
 24 date), ..... (city and state of birth), ..... (sex),  
 25 ..... (race).

1 Name of guardian father: ..... (first) ..... (middle) .....  
2 (last), ..... (race).

3 Maiden name of guardian mother: ..... (first) .....  
4 (middle) ..... (last), ..... (race).

5 Name of birth mother (if known): ..... (first) .....  
6 (middle) ..... (last) ..... (race).

7 Name of birth father (if known): ..... (first) .....  
8 (middle) ..... (last), .....(race).

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

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

15 I was surrendered for adoption in ..... (city and state), .....  
16 (approximate date).

17 Other identifying information: .....  
18 .....  
19 (signature of surrendered person)  
20 .....  
21 (date) (printed name of person  
22 surrendered for adoption)

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

## 1                   REGISTRATION IDENTIFICATION FORM

## 2                   FOR SURVIVING RELATIVES OF DECEASED BIRTH PARENTS

3                   (Insert all known information)

4 I, ....., state the following:

5       Name of deceased birth parent at time of surrender:

6       Deceased birth parent's date of birth:

7       Deceased birth parent's date of death:

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 My relationship to the adopted or surrendered person (check  
13 one): (birth parent's non-surrendered child) (birth parent's  
14 sister) (birth parent's brother).15 If you are a non-surrendered child of the birth parent, provide  
16 name(s) at birth and age(s) of non-surrendered siblings having  
17 a common parent with the birth parent. If more than one  
18 sibling, please give information requested below on reverse  
19 side of this form. If you are a sibling or parent of the birth  
20 parent, provide name(s) at birth and age(s) of the sibling(s)  
21 of the birth parent. If more than one sibling, please give  
22 information requested below on reverse side of this form.23       Name (First) ..... (middle) ..... (last), .....(birth  
24       date), ..... (city and state of birth), ..... (sex),  
25       ..... (race).

1 Name(s) of common parent(s) (first) ..... (middle) .....  
 2 (last), .....(race), (first) ..... (middle) .....  
 3 (last), .....(race).

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

18 .....  
 19 (signature of birth parent's surviving relative)

20 .....  
 21 (date) (printed name of birth  
 22 parent's surviving relative)



1 shall be substantially as follows:

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

5 I, ....., state the following:

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

10 Adopted or surrendered person's date of death:

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

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

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

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

25 My child/parent/deceased spouse was surrendered for  
26 adoption to .....(name of agency) City and state of agency

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

15 .....  
 16 (signature of adopted or surrendered person's surviving  
 17 relative)

18 .....  
 19 (date) (printed name of adopted  
 20 person's surviving relative)

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

23 INFORMATION EXCHANGE AUTHORIZATION

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

12  1. Only my name and last known address.

13  2. A copy of my Illinois Adoption Registry  
14 Application.

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

20  4. A copy of my completed medical questionnaire.

21 I am fully aware that I can only be supplied with  
22 information about an individual or individuals who have duly  
23 executed an Information Exchange Authorization that has not  
24 been revoked or, if I am an adopted or surrendered person who  
25 was born on or after January 1, 1946, from a birth parent who  
26 completed a Birth Parent Preference Form and did not prohibit

1 the release of his or her identity to me; that I can be  
2 contacted by writing to: ..... (own name or name of person to  
3 contact) (address) (phone number).

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

8 Dated (insert date).

9 .....

10 (signature)

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

13 DENIAL OF INFORMATION EXCHANGE

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

24 IMPORTANT NOTE: A DENIAL FILED BY A BIRTH PARENT ON OR AFTER  
25 JANUARY 1, 2011, SHALL NOT PROHIBIT THE RELEASE OF THE BIRTH

1 PARENT'S IDENTIFYING INFORMATION ON THE ORIGINAL BIRTH  
 2 CERTIFICATE OF AN ADULT ADOPTED OR SURRENDERED PERSON. BIRTH  
 3 PARENTS WHO WISH TO PROHIBIT THE RELEASE OF THEIR IDENTIFYING  
 4 INFORMATION ON THE ORIGINAL BIRTH CERTIFICATE OF AN ADULT  
 5 ADOPTED OR SURRENDERED PERSON SHALL FILE A BIRTH PARENT  
 6 PREFERENCE FORM ON OR AFTER JANUARY 1, 2011. DENIALS FILED BY A  
 7 BIRTH PARENT BEFORE JANUARY 1, 2011, WILL EXPIRE UPON THE DEATH  
 8 OF THE BIRTH PARENT WITH RESPECT TO ACCESS TO IDENTIFYING  
 9 INFORMATION ON THE ORIGINAL BIRTH CERTIFICATE RELEASED TO AN  
 10 ADULT ADOPTED OR SURRENDERED PERSON OR TO A SURVIVING ADULT  
 11 CHILD OR SURVIVING SPOUSE OF A DECEASED ADOPTED OR SURRENDERED  
 12 PERSON.

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

25 Dated (insert date).

26

.....

1 (signature)

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

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

25 In selecting one of the 5 options below, birth parents

1 should keep in mind that the decision to deny an adult adopted  
2 or surrendered person access to identifying information on his  
3 or her original birth record and/or information about  
4 genetically-transmitted diseases is an important one that can  
5 impact the adopted or surrendered person's life in many ways. A  
6 request for anonymity on this form only pertains to information  
7 that is provided to an adult adopted or surrendered person or  
8 his or her surviving relatives through the Registry and does  
9 not prevent the disclosure of identifying information that may  
10 be available to the adoptee through his or her adoptive parents  
11 and/or other means available to him or her. Birth parents who  
12 would prefer not to be contacted by their surrendered son or  
13 daughter are strongly urged to complete both the  
14 Non-Identifying Information Section included on the final page  
15 of this document and the Medical Questionnaire in order to  
16 provide their surrendered son or daughter with the background  
17 information their surrendered son or daughter may need to  
18 better understand himself or herself and his or her origins.  
19 ~~Furthermore, birth parents whose surrendered son or daughter is~~  
20 ~~under 21 years of age at the time of completion of this form~~  
21 ~~are reminded that, since~~ Since no original birth certificates  
22 are released by the IARMIE before an adoptee has reached the  
23 age of 21, birth parents whose surrendered son or daughter is  
24 under 21 years of age ~~and birth parents~~ are encouraged to take  
25 as much time as they need to weigh the options available to  
26 them before completing this form. Should you need additional

1 assistance in completing this form, please contact the agency  
2 that handled the adoption, if applicable, or the Illinois  
3 Adoption Registry and Medical Information Exchange at  
4 217-557-5159.

5 After careful consideration, I, (insert your name) .....,  
6 have made the following decision regarding contact with my  
7 birth son/birth daughter, (insert birth son's/birth daughter's  
8 name at birth, if applicable) ....., who was born in (insert  
9 city/town of birth) ..... on (insert date of birth)..... and  
10 the release of my identifying information as it appears on  
11 his/her original birth certificate when he/she reaches the age  
12 of 21, and I have chosen Option ..... (insert A, B, C, D, or E,  
13 as applicable). I realize that this form must be accompanied by  
14 a completed IARMIE application form as well as a Medical  
15 Information Exchange Questionnaire or the \$15 registration  
16 fee. I am also aware that I may revoke this decision at any  
17 time by completing a new Birth Parent Preference Form and  
18 filing it with the IARMIE. I understand that it is my  
19 responsibility to update the IARMIE with any changes to contact  
20 information provided below. I also understand that, while  
21 preferences regarding the release of identifying information  
22 through the Registry are binding unless the law should change  
23 in the future, any selection I have made regarding my preferred  
24 method of contact is not.

25 .....

26 (Signature/Date)



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

3 Option A. My birth son or birth daughter was born on or after  
4 January 1, 1946, and I agree to the release of my identifying  
5 information as it appears on my birth son's/birth daughter's  
6 original birth certificate, OR my birth son or birth daughter  
7 was born prior to January 1, 1946. I would welcome direct  
8 contact with my birth son/birth daughter when he or she has  
9 reached the age of 21 and I wish to be contacted at the  
10 following mailing address, email address or phone number:

11 .....  
12 .....  
13 .....  
14 .....

15 (Signature/Date)

16 Option B. My birth son or birth daughter was born on or after  
17 January 1, 1946, and I agree to the release of my identifying  
18 information as it appears on my birth son's/birth daughter's  
19 original birth certificate, OR my birth son or birth daughter  
20 was born prior to January 1, 1946. I would welcome contact with  
21 my birth son/birth daughter when he or she has reached the age  
22 of 21, but I would prefer to be contacted through the following  
23 person. (Insert name and mailing address, email address or

1 phone number of chosen contact person.)

2 .....

3 .....

4 (Signature/Date)

5 Option C. 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 ~~name~~ as it appears on my birth son's/birth  
8 daughter's original birth certificate, OR my birth son or birth  
9 daughter was born prior to January 1, 1946. I would welcome  
10 contact with my birth son/birth daughter when he or she has  
11 reached the age of 21, but I would prefer to be contacted  
12 through the Illinois confidential intermediary program (please  
13 call 800-526-9022 for additional information) or through the  
14 agency that handled the adoption. (Insert agency name, address  
15 and phone number, if applicable.)

16 .....

17 .....

18 (Signature/Date)

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

1 she has reached the age of 21.

2 .....

3 (Signature/Date)

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

16 .....

17 .....

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

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

6 .....

7 .....

8 (Signature/Date)

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

23 Non-Identifying Information Section

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

1 ~~or daughter:~~

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

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

4 My height is: .....

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

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

8 My eye color is: .....

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

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

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

15 My occupation is best described as .....

16 My hobbies include .....

17 My interests include .....

18 My talents include .....

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

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

1 .....  
2

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

5 REQUEST FOR A NON-CERTIFIED COPY OF AN ORIGINAL BIRTH  
6 CERTIFICATE

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

25 Dated (insert date).

26 .....

(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

1 or surviving spouse of a deceased adopted or surrendered person  
 2 is acknowledged before a representative of an agency, such  
 3 representative shall have his signature on said Certificate  
 4 acknowledged before a notary public, in form substantially as  
 5 follows:

6 State of.....

7 County of.....

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

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

16 .....  
 17 (signature)

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



1 services.

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

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

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

19 (750 ILCS 50/18.3a) (from Ch. 40, par. 1522.3a)

20 Sec. 18.3a. Confidential intermediary.

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

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

1 deceased adopted or surrendered person who wishes to petition  
2 the court for the appointment of a confidential intermediary  
3 shall be required to accompany their petition with proof of  
4 registration with the Illinois Adoption Registry and Medical  
5 Information Exchange.

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

1 biological relative.

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

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

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

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

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

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

26 (2) Oversight of methods used to verify that

1 intermediaries are complying with the appropriate laws.

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

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

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

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

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

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

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

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



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

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

24 In conducting a search under this Section, the confidential  
25 intermediary shall attempt to locate the relative or relatives  
26 from whom the petitioner has requested information. If the

1 sought-after relative is deceased or cannot be located after a  
2 diligent search, the confidential intermediary may contact  
3 other adult relatives of the sought-after relative.

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

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

21 (2) The sought-after relative may consent to  
22 completing a medical questionnaire only. In this case, the  
23 confidential intermediary shall provide the questionnaire  
24 and ask the sought-after relative to complete it. The  
25 confidential intermediary shall forward the completed  
26 questionnaire to the petitioner and inform the petitioner

1 of the sought-after relative's desire to not provide any  
2 additional information.

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

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

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

1 appointment as a confidential intermediary, I affirm that:

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

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

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

10 ....."

11 (k) Sanctions.

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

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

23 (3) The Department shall fine any confidential  
24 intermediary who improperly discloses confidential  
25 information in violation of item (1) or (2) of this  
26 subsection (k) an amount up to \$2,000 per improper

1 disclosure. This fine does not affect civil liability under  
2 item (2) of this subsection (k). The Department shall  
3 deposit all fines and penalties collected under this  
4 Section into the Illinois Adoption Registry and Medical  
5 Information Fund.

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

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

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

1 search before the case is closed.

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

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

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

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

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

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

21 (750 ILCS 50/18.6) (from Ch. 40, par. 1522.6)

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



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

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

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