cuit	Court for	·		City or County	C	ase No			
:					Name				
Address				Apt. #	Street Address				Ap
	State Pl		Area Code	Telephone	City	State Defe	Zip Code ndant No.	Area Code 1	Telephon
					Name				
					Street Address				Ap
					City	State Defe	Zip Code	Area Code 2	Telephone
			CON	IPLAINT F (DOM)	FOR CUSTOD REL 4)	Υ			
					, representing	g myself,	state that:		
Lom	the 🗌 mo	Your name	or or						
	e following			·	Relationship (fo	or example, au	nt, grandfather,	guardian,	etc.)
01 th			Id(IOI)						
	Name of	Child		Date of Birth		Name of Chi	ld		Date of Bir
	Name of	Child		Date of Birth		Name of Chi	ld		Date of Bir
	Name of Child			Date of Birth	Name of Child			Date of Bi	
				is the	mother fath	er or			
of th	Defendate child(ren)		nt No.		$nother \square_{(check one)} father$			lationship	
The	child(ren) l	ive(s) at							
with	with Name of person				-			_ ·	
									1
		lave liveu i	ii uie i	onowing pia	aces, with the per	ISONS IIIU		ing the	1451
	years: e Period	Place	N	Jama(s)/Cu	rent Address o	f Dorson	(c) with w	hom (^a hild I i
<u>1 III</u>		<u>I lace</u>	1		Tent Address o		<u>s) with w</u>		
	·								

5. I know of the following cases concerning the child(ren) (such as domestic violence (protective order), paternity, divorce of the child(ren)'s parents, custody, visitation, termination of parental rights, adoption or other cases):

<u>Court</u>	<u>Case No.</u>	Kind of Case	<u>Year Filed</u>	<u>Results or Status (if you kno</u>
Attach th	e most recent court	t order for the abo	ve-referenced	court cases.
	en a party, witness, of the child(ren):	, or otherwise invo	olved in the fol	lowing cases about custody or
<u>State</u>	<u>Court</u>	<u>Case No.</u>	Date	of Child Custody Determination
		t order for the abo	ove-referenced	court cases.
I know of	f the following peop			have physical custody of, or attion with the child(ren):
I know of	f the following peop	or physical custo		
I know of claim rig	f the following peop	v or physical custo	ody of, or visita	
I know of claim rig	f the following peop	v or physical custo	ody of, or visita	
I know of claim rig Name Name Name	f the following peo hts of legal custody	v or physical custo	ody of, or visita Current Address Current Address Current Address	
I know of claim rig Name Name Name	f the following peo hts of legal custody	v or physical custo	ody of, or visita Current Address Current Address Current Address	tion with the child(ren):
I know of claim rig Name Name Name	f the following peo hts of legal custody	v or physical custo	ody of, or visita Current Address Current Address Current Address	tion with the child(ren):
I know of claim rig Name Name Name	f the following peo hts of legal custody	v or physical custo	ody of, or visita Current Address Current Address Current Address	tion with the child(ren):
I know of claim rig Name Name It is in the	f the following peo hts of legal custody	v or physical custo	ody of, or visita	tion with the child(ren):
I know of claim rig Name Name It is in the Ut is in the Ut is in the Ut is in the	f the following peop hts of legal custody e best interests of the EASONS, I reque	v or physical custo	ody of, or visita	tion with the child(ren):
I know of claim right Name Name It is in the CHESE R G	f the following peop hts of legal custody e best interests of th	v or physical custo	ody of, or visita Current Address Current Address Current Address e in my custody a all that apply stody of the ch	tion with the child(ren):

llow	to visit with the child(ren) on
llow no visitation because	
nder	to pay health insurance for child(ren).
order	to pay child support (attach Financia
tatement. Use Form Dom. Rel. 30 or I	Dom. Rel. 31).
Name(s)	

Order any other appropriate relief.

Date

Signature