

BMC Division _____	District Court Division _____	Juvenile Court Division _____	Prob & Family Court Division _____	Superior Court Division _____
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**Section 1** I, \_\_\_\_\_ hereby declare, to the best of my knowledge, information, and belief that all information on this form is true and complete:

**Section 2** The name(s) of the child(ren) whose care or custody is at issue in this case are:  
 A. \_\_\_\_\_ (LAST, FIRST)      B. \_\_\_\_\_ (LAST, FIRST)      C. \_\_\_\_\_ (LAST, FIRST)  
 Use only the letter appearing in front of the child's name above when referring to the child in completing the remaining sections.

**Section 3** The party filing this affidavit may request certain addresses to be kept confidential if the address is a shelter for battered persons and their dependent child(ren), or the party filing this affidavit believes that he/she or the child(ren) are in danger of physical or emotional abuse, or the party is filing an action under G.L. c. 209A. **If you believe that this provision applies to you, check the box at right, complete sections 10 and 11 on the reverse side of this page and DO NOT complete sections 4 and 5 below.**

**Section 4** The address(es) of the above-named child(ren) whose care and custody is at issue in this case is/are:  
 Address(es): \_\_\_\_\_ Address(es) During the Last 2 Years, if Different \_\_\_\_\_  
 CHILD A \_\_\_\_\_  
 CHILD B \_\_\_\_\_  
 CHILD C \_\_\_\_\_

**Section 5** My address is: \_\_\_\_\_

**Section 6** I  have  have not participated in and I  know  do not know of other care or custody proceedings involving the above-named child(ren) in Massachusetts or in any state or country.

Certified copies of any pleadings or determinations in care or custody proceeding outside of Massachusetts listed in Sections 7 and 8 must be filed with this affidavit unless already filed with this court or an extension for filing these documents has been granted by this court.

**Section 7** The following is a list of all pending or concluded proceedings I have participated in or know of involving the care or custody of the above-named child(ren):

Letter of Child	Court	Docket No.	Status	[W]itness [P]arty [O]ther [N]one
CHILD _____	_____	_____	_____	[ ]
CHILD _____	_____	_____	_____	[ ]
CHILD _____	_____	_____	_____	[ ]

**Section 8** The names and addresses of parties to care or custody proceedings involving any of the above-named child(ren) or those claiming a legal right to these child(ren) during the last two years (not including myself) are:

Letter of Child	Name of Party/Claimant	Current (or last known) Address of Party/Claimant
CHILD _____	_____	_____
CHILD _____	_____	_____
CHILD _____	_____	_____

**Section 9** **If the box at the right is checked, this affidavit discloses the adoption of one or more of the above-named child(ren) and I am requesting the court to impound this affidavit. See instructions.**

This affidavit must be personally signed by the party listed in section 1 above, unless he/she is under 18 years of age or has been adjudged incompetent in which case the attorney of record must sign. A revised affidavit must be filed with the court if new information is discovered subsequent to this filing.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ under the penalties of perjury.

X \_\_\_\_\_  
SIGNATURE OF PARTY OR ATTORNEY OF RECORD FOR JUVENILE/INCOMPETENT

\_\_\_\_\_  
PRINTED NAME OF PERSON SIGNING

\_\_\_\_\_  
ADDRESS OF ATTORNEY OF RECORD FOR JUVENILE/INCOMPETENT

**THE PARTY FILING THIS AFFIDAVIT MUST FURNISH A COPY OF IT TO ALL OTHER PARTIES TO THIS ACTION.**

The party filing this affidavit may request certain address(es) to be kept confidential if the address is a shelter for battered persons and their dependent child(ren), or the party filing this affidavit believes that he/she or the child(ren) are in danger of physical or emotional abuse, or the party is filing an action under G.L. c. 209A. **If you checked the box in section 3 indicating that you believe the above provision applies to you, complete sections 10 and 11 below, and DO NOT complete sections 4 and 5.**

**Section 10**

The address(es) of the child(ren) listed in section 2 whose care or custody is at issue in this case are:

Child(ren)	Address(es)	Address(es) During Last 2 Years, If Different
<b>Child A.</b>	_____ Street Address _____	_____
	_____ City, State, Zip Code _____	_____
<b>Child B.</b>	_____ Street Address _____	_____
	_____ City, State, Zip Code _____	_____
<b>Child C.</b>	_____ Street Address _____	_____
	_____ City, State, Zip Code _____	_____

**Section 11**

My address is: \_\_\_\_\_  
Street Address, City, State, Zip Code

**LIST OF ATTORNEYS AND GUARDIANS AD LITEM/INVESTIGATORS**

Please list the names of all attorneys and guardians ad litem involved in the pending proceedings listed in section 7.

1. \_\_\_\_\_  
Attorney(s) for child(ren). (Please specify if each child is represented by a different attorney.)

2. \_\_\_\_\_  
GAL(s)/Investigator(s) (Please indicate if a GAL has been appointed to represent a specific child.)

3. \_\_\_\_\_  
Attorney(s) for ~~an~~ of

4. \_\_\_\_\_  
Attorney(s) for ~~an~~ of

(Fill Out Below If Applicable)

I, \_\_\_\_\_, attorney for D.C.F. or its agent have ascertained from the above checked off attorney(s) and guardian(s) ad litem/investigators a willingness to accept an appointment from the court to represent the same party should the court elect to make such appointment.

\_\_\_\_\_  
(Signature)