

AFFIDAVIT DISCLOSING CARE OR CUSTODY PROCEEDINGS

TRIAL COURT OF MASSACHUSETTS

DOCKET NUMBER

Pursuant to Trial Court Rule IV

Name Of Case _____



Boston Municipal Court

District Court

Juvenile Court

Probate & Family Court

Superior Court

Division

Division

Division

Division

Section 1 I, _____, hereby declare, to the best of my knowledge, information, and belief that all the information on this form is true and complete:
NAME OF PARTY (PRINT)

Section 2 The name(s) of the child(ren) whose care or custody is at issue in this case are:
 A. _____ B. _____ C. _____
(LAST, FIRST) (LAST, FIRST) (LAST, FIRST)
 Use only the letter appearing in front of the child's name above when referring to that 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 the 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 or custody is at issue in this case are:
Address(es) Address(es) During 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 other state or country.

Certified copies of any pleadings or determinations in a 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 of Case (Custody awarded to) (Date of award)	(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 INCOMPETENT/JUVENILE PRINTED NAME OF PERSON SIGNING

ADDRESS OF ATTORNEY OF RECORD FOR INCOMPETENT/JUVENILE

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

COURT'S COPY