

<b>COMPLAINT TO ESTABLISH PATERNITY</b>	Docket No.	<b>Commonwealth of Massachusetts The Trial Court Probate and Family Court</b>
Sarah Roe, Plaintiff  V.  Michael Jones, Defendant		<b>Middlesex</b> <span style="float: right;"><b>Division</b></span> 208 Cambridge Street P.O. Box 410-480 East Cambridge, MA 02141 (617) 768-5800

1. Plaintiff, who resides at 40 Circle St 5 Medford  
(MA) 00003, is (Address Line) (Apt, Unit, No. etc.) (City/Town)  
(State) (Zip)

- the  mother  father of a child born out of wedlock.  
 a child born out of wedlock.  
 the  guardian  custodian of a child born out of wedlock.  
 the  parent  personal representative of the  mother  father of a child born out of wedlock.

Plaintiff is:

- Department of Children and Families  an agency licensed under G.L. c. 28A  Department of Revenue

2. The child who is the subject of this complaint is:

Carol N. Roe Date of Birth 12-18-2009  
First Name M.I. Last Name  
resides at 40 Circle St. 5 Medford MA 00003  
(Address Line) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

3. Defendant, who resides at 50 Square St. 7 Malden  
(MA) 00004, is the  mother  father of the above-named child who was born out of wedlock.  
(State) (Zip) (Address Line) (Apt, Unit, No. etc.) (City/Town)

4. The plaintiff and defendant are not married.  
5. The mother of the child was not married at the time of the child's birth and was not married within three hundred days before the birth of the child.

6. Wherefore, the plaintiff requests that the Court:

- adjudicate the  plaintiff  defendant to be the father of the child.  
 order a suitable amount of support for the child.  
 order the  plaintiff  defendant to  maintain  provide health insurance for the benefit of the child.  
 prohibit the defendant from imposing any restraint on the personal liberty of the  plaintiff and/or  the child.  
 grant the  plaintiff  defendant custody of the child.  
 grant the  plaintiff  defendant parenting time with the child.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Attorney or Plaintiff, if pro se

**Sarah Roe**  
\_\_\_\_\_  
Print name

**40 Circle St.**  
\_\_\_\_\_  
(Address Line)

**5**  
\_\_\_\_\_  
(Apt, Unit, No. etc.)

**Medford**  
\_\_\_\_\_  
(City/Town)

**MA**  
\_\_\_\_\_  
(State)

**00003**  
\_\_\_\_\_  
(Zip)

Primary Phone #: **111 111 1111**  
\_\_\_\_\_

BBO No.: \_\_\_\_\_

**SAMPLE**