**[COUNTERCLAIM/COUNTERCOMPLAINT] TO [PETITION/COMPLAINT] FOR [CASE TYPE]**

[TYPE OF COURT] OF ­­­­­­[STATE], COUNTY OF [NAME OF COUNTY]

Case number: [Enter case number]

PETITIONER/PLAINTIFF RESPONDENT/DEFENDANT

|  |  |
| --- | --- |
| NameClick or tap here to enter text. | NameClick or tap here to enter text. |
| Date of BirthClick or tap here to enter text. | Date of BirthClick or tap here to enter text. |
| Street Address (including Apt)Click or tap here to enter text. | Street Address (including Apt)Click or tap here to enter text. |
| City/State/Zip CodeClick or tap here to enter text. | City/State/Zip CodeClick or tap here to enter text. |
| Attorney NameClick or tap here to enter text. | Attorney NameClick or tap here to enter text. |

I, [your full name], state that:

1. I am filing a counterclaim to [type of document] filed against me.
2. I am the [ ]  mother [ ]  father [ ]  [Specify other relation to child] of the following minor child(ren):

|  |  |
| --- | --- |
| **Name(s)** | **Date(s) of Birth** |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |

1. The child(ren) live(s) at [address] with [name of person].
2. The child(ren) has/have lived in [state] for at least six (6) months [ ]  yes [ ]  no. In the past five (5) years the child(ren) has/have lived in the following places with the following person(s):

|  |  |  |
| --- | --- | --- |
| **Time Period** | **City and State** | **Name(s) and Current Address(es) of Person(s) with whom Child(ren) Lived** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

1. I know of the following cases, or I have been involved (as a party, witness, etc.) in the following cases about me, the other party, or the child(ren). (e.g., custody, child support, guardianship, domestic violence/protective order, paternity, divorce, visitation, delinquency, termination of parental rights, adoption or other cases)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Court** | **Case No.** | **Type of Case** | **Year Filed** | **Result or Status (if you know)** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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**Attach the most recent court order for these cases.**

1. I know of the following people, who are not parties in this case, who have physical custody of or claim rights of legal custody, physical custody, or visitation with the child(ren):

|  |  |
| --- | --- |
| **Name** | **Current Address** |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
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| Click or tap here to enter text. | Click or tap here to enter text. |

1. It is in the best interest of the child(ren) that I have **(*Check all that apply*)**:

[ ]  joint legal custody [ ]  sole legal custody of the child(ren)because

[State your main reasons briefly]

[ ]  joint physical custody [ ]  sole physical custody of the child(ren) because

[State your main reasons briefly]

**FOR THESE REASONS** I want the court to ***(Check all that apply and attach forms indicated)***:

Grant me [ ]  joint legal custody [ ]  sole legal custody of the child(ren).

Grant me [ ]  joint physical custody [ ]  sole physical custody of the child(ren).

[ ]  Prohibit [name of person] from visiting with the child(ren) because [Explain briefly why the other party should not have visits.]

[ ]  Allow [name of person] to visit with the child(ren) on the following terms.

***If you selected joint physical custody or visitation, attach a proposed schedule or use the space below to write one, including relevant holidays and school breaks***:

Click or tap here to enter text.

[ ]  Order [name of person(s)] to pay health insurance for child(ren).

[ ]  Order [name of person] to pay child support.

[ ]  Order: [Specify any other requests related to the child(ren). It’s usually easiest to explain details by attaching a parenting plan.]

[ ]  Order any other appropriate relief.

I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

SWORN TO AND SUBSCRIBED before me this date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public