## AFFIDAVIT CONCERNING CHILDREN

At (Town)

JD-FM-164 Rev. 2-15 C.G.S. § 46b-115s P.B. § 25-57

Judicial District of

## Instructions

Probate District name and number

## STATE OF CONNECTICUT SUPERIOR COURT COURT OF PROBATE

Docket number

www.jud.ct.gov

Court Use Only

AFFACUS

Fill out this form completely. You must swear that your statements are true and sign this form in front of a court clerk, a notary public, or an attorney who will also sign and date the affidavit.

laintiff/Applicant's (Last, first, middle initial)		Defendant/Respondent's (Last, first, middle initial)		
You must provide information a lf you need more space, use for		each child affected by	this case. Provide the infor	mation below.
Child's name (First, middle, last)			Date of birth (Mont	th, day, year)
Date(s) of residence	Place of residence (Town or city, and state, unless confidential by court order)	pers	and present address(es) of on(s) child lived with nless confidential)	Relationship to child
From To The present				
From To(date) (date)	_			
From To(date) (date)	_			
From To(date) (date)	_			
From To(date) (date)	_			
Child's name (First, middle, last)	Date	e of birth (Month, day, year)	Residence information is sam (If not same, provide informat	
Date(s) of residence	Place of residence (Town or city, and state, unless confidential by court order)	pers	and present address(es) of on(s) child lived with nless confidential)	Relationship to child
From To The present				
From To (date) (date)	_			
From To(date) (date)				
From To(date) (date)	_			
From To (date) (date)	_			

	concerning custody of or visitat	or a witness or in any other capacity in a case ion with any child listed in this affidavit. If you ne date of the decision in the case or cases:			
(Check item 2 or 3 below)					
		state, now or in the past, that could affect the tive order, termination of parental rights and			
		r state, now or in the past, that could affect the ctive order, termination of parental rights and			
Case name	Docket number	Court location (Including state)			
Nature of proceeding	1				
Case name	Docket number	Court location (Including state)			
Nature of proceeding					
, <b>,</b>					
or claims to have custody					
Name:					
Address:					
(unless confidential)					
5. The mother of the child(ren) named in the C	Complaint or Application is preg	nant.			
☐ Yes ☐ No ☐ Do not l	know				
6. A child has been born to the mother named	in the Complaint or Application	n after the filing of the Complaint or Application.			
☐ Yes ☐ No ☐ Do not I	know If yes, fill in the fo	llowing:			
Child's name		Date of birth (Month, day, year)			
Signature	Print name of pers	on signing			
Sworn to before me (Assistant Clerk/Commissioner of Superior Co	ourt/Notary Public)	Date signed			
JD-FM-164 Rev. 2-15		Page 2 of 2			

You must tell the court about any case in Connecticut or another state that could affect this case, if you learn about

it during this case.

## **ADA NOTICE**

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA.