

## Not Approved for use in Contested Cases

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

In re the Marriage of:

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter your full legal name above)

-and-

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent**. (Enter your spouse's full legal name above)

**Case**

**Number** \_\_\_\_\_

(Will be assigned when case is filed)

**Division**

**Number** \_\_\_\_\_

(Will be assigned when case is filed)

## Judgment and Decree of Dissolution of Marriage

### Parties

1. Appearances (Check all that apply)

☐ Petitioner appears in person.

☐ Respondent appears in person.

☐ Petitioner appears by attorney.

☐ Respondent appears by attorney.

☐ Cause submitted upon affidavit of Petitioner.

☐ Cause submitted upon affidavit of Respondent.

☐ Guardian ad Litem appears in person.

☐ Third Party \_\_\_\_\_ appears in person.  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

☐ Third Party \_\_\_\_\_ appears by attorney.  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

2. The last four digits of the Petitioner's Social Security Number are \_\_\_\_\_ and the last four digits of the Respondent's Social Security Number are \_\_\_\_\_.

3. Check one of the two boxes.

☐ Respondent is not on active duty in the armed services of the United States now or any time since the filing of the petition herein.

☐ Respondent is on active duty in the armed services of the United States, but has waived his or her rights pursuant to the Servicemembers Civil Relief Act of 2003.

### Jurisdiction

4. Thirty (30) days have elapsed since the filing of the petition herein.

5. Check one of the two boxes.

☐ The court has personal jurisdiction over Respondent.

☐ The court does not have personal jurisdiction over Respondent.

6. *Check all that apply.*

- ☐ Petitioner has been a resident of the State of Missouri for at least 90 days immediately prior to the filing of the petition herein.
- ☐ Respondent has been a resident of the State of Missouri for at least 90 days immediately prior to the filing of the petition herein.

## Marriage

7. The parties were married on \_\_\_\_/\_\_\_\_/\_\_\_\_. The marriage was registered in the  
(mm/dd/yyyy)  
county of \_\_\_\_\_, in the state of \_\_\_\_\_.
8. The parties continued to live together until \_\_\_\_/\_\_\_\_/\_\_\_\_, on or about which date they separated.  
(mm/dd/yyyy)
9. There is no reasonable likelihood that the marriage of the parties can be preserved, and the marriage is therefore irretrievably broken.

## Children

10. *Check all that apply.*

- ☐ Petitioner ☐ Respondent is/are not now pregnant.

11. *Check one of the two boxes.*

- ☐ There are no unemancipated children born or adopted of the marriage.
- ☐ There is/are \_\_\_\_\_ unemancipated living child(ren) born or adopted of the marriage.  
(Enter number)

The name(s), age(s) and last four digits of the Social Security Number(s) of said child(ren) are:

_____ (First Name)	_____ (Middle Name)	_____ (Last Name)	_____ (Jr./Sr./III)	_____ (Child's Age)	_____ (Last 4 digits)
_____ (First Name)	_____ (Middle Name)	_____ (Last Name)	_____ (Jr./Sr./III)	_____ (Child's Age)	_____ (Last 4 digits)
_____ (First Name)	_____ (Middle Name)	_____ (Last Name)	_____ (Jr./Sr./III)	_____ (Child's Age)	_____ (Last 4 digits)
_____ (First Name)	_____ (Middle Name)	_____ (Last Name)	_____ (Jr./Sr./III)	_____ (Child's Age)	_____ (Last 4 digits)
_____ (First Name)	_____ (Middle Name)	_____ (Last Name)	_____ (Jr./Sr./III)	_____ (Child's Age)	_____ (Last 4 digits)
_____ (First Name)	_____ (Middle Name)	_____ (Last Name)	_____ (Jr./Sr./III)	_____ (Child's Age)	_____ (Last 4 digits)

As used herein, "minor child(ren)" refers to the unemancipated living child(ren) listed above.

## It is therefore ordered, adjudged and decreed that:

12. The marriage of Petitioner and Respondent is dissolved.

## Maintenance

13. Maintenance to Petitioner *(Check one of the three boxes)*

- ☐ No maintenance is to be paid to Petitioner by Respondent. This order is not subject to modification.
- ☐ Respondent is ordered to pay to Petitioner the sum of \_\_\_\_\_ per month as and for maintenance. Said maintenance ☐ is ☐ is not subject to modification. *(Check "is" or "is not" if you choose this option)*
- ☐ The court lacks jurisdiction to enter any orders with respect to maintenance of Petitioner.

14. Maintenance to Respondent *(Check one of the three boxes)*

- ☐ No maintenance is to be paid to Respondent by Petitioner. This order is not subject to modification.
- ☐ Petitioner is ordered to pay to Respondent the sum of \_\_\_\_\_ per month as and for maintenance. Said maintenance ☐ is ☐ is not subject to modification. *(Check "is" or "is not" if you choose this option)*
- ☐ The court lacks jurisdiction to enter any orders with respect to maintenance of Respondent.

15. Wage Assignment for Maintenance (If maintenance is to be paid by either party) *(Check one of the two boxes)*

- ☐ Income withholding shall be prepared by the obligee and issued by the circuit clerk upon the effective date of this order.
- ☐ Income withholding shall not issue for the following reason(s):

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## Child Custody (If there are unemancipated children)

16. *Check one of the two boxes.*

- ☐ The court does **not** have "jurisdiction" (as defined in the Uniform Child Custody Jurisdiction and Enforcement Act, §452.700, RSMo, et seq.) over the custody arrangements of the minor child(ren) and therefore enters no further orders with respect to the custodial arrangements of the minor child(ren).
- ☐ The court has "jurisdiction" (as defined in the Uniform Child Custody Jurisdiction and Enforcement Act, §452.700, RSMo, et seq.) over the custody arrangements of the minor child(ren).

The court approves the provisions of Part A of the parenting plan marked Exhibit \_\_\_\_\_ pertaining to the custodial arrangements of the minor child(ren) and finds that the custodial arrangements contained in said parenting plan are in the best interests of the minor child(ren).

Therefore, the court orders the provisions of Part A of said parenting plan pertaining to the custodial arrangements of the minor child(ren) and incorporates by reference all of the terms and conditions pertaining to the custodial arrangements of the minor child(ren) set forth in Part A of said parenting plan as if fully set forth herein.

The sheriff or other law enforcement officers shall enforce the rights of any person to custody or visitation pursuant to §452.425, RSMo.

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In the event of noncompliance with this order, the aggrieved party may file a verified motion for contempt. If custody, visitation, or third-party custody is denied or interfered with by a parent or third party without good cause, the aggrieved person may file a family access motion with the court stating the specific facts that constitute a violation of the custody provisions of the judgment of dissolution, legal separation, or judgment of paternity. The circuit clerk will provide the aggrieved party with an explanation of the procedures for filing a family access motion and a simple form for use in filing the family access motion. A family access motion does not require the assistance of legal counsel to prepare and file.

### **Child Support (If there are unemancipated children)**

17. *Check one of the two boxes.*

- ☐ The court does not have jurisdiction to enter any orders with respect to the support of the minor child(ren).
  - ☐ The court orders the provisions of Part B of the parenting plan marked Exhibit \_\_\_\_\_, pertaining to the support of the minor child(ren) and incorporates by reference all of the terms and conditions set forth in Part B of said parenting plan as if fully set forth herein.
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### **Marital and Non-marital Property and Marital Debt**

18. *Division of Property (Check one of the two boxes)*

- ☐ The parties have entered into a separation agreement marked Exhibit \_\_\_\_\_, which is found to be **not unconscionable**. Said separation agreement is incorporated herein and the parties are ordered to perform the terms and conditions set forth therein as well as such further and other orders contained in this judgment.
- ☐ The parties have **not** entered into a separation agreement. All marital and non-marital property and marital debt are divided in Exhibit \_\_\_\_\_. Said division is fair and equitable and the parties are ordered to perform the terms and conditions set forth therein.

19. *Real Property (Check if applicable)*

- ☐ The legal description of the real property or properties divided herein is more fully set forth in Exhibit(s) \_\_\_\_\_, which is/are incorporated into and made a part of this judgment.

20. Pension and Retirement Plans

If this judgment divides any pension or retirement benefits, the court intends its judgment to be a qualified domestic relations order and retains jurisdiction for the purpose of establishing or maintaining this order as a qualified domestic relations order or to revise or conform its terms so as to effectuate the expressed intent of this order.

21. Other Orders Concerning Property and Debt (*Check if applicable*)

☐ \_\_\_\_\_ is ordered to pay to \_\_\_\_\_ the sum of \_\_\_\_\_  
as and for \_\_\_\_\_

22. This judgment divides all marital and non-marital property and marital debt. No other marital or non-marital property or marital debt remains to be divided by the court except as set forth herein.

**Attorney's Fees**

23. *Check one of the three boxes.*

- ☐ Neither party is awarded attorney's fees from the other party.
- ☐ Petitioner shall pay to \_\_\_\_\_ the sum of \_\_\_\_\_ as and  
for Respondent's attorney's fees herein.
- ☐ Respondent shall pay to \_\_\_\_\_ the sum of \_\_\_\_\_ as  
and for Petitioner's attorney's fees herein.

**Name Change**

24. *Check all that apply.*

- ☐ Petitioner is granted restoration of their (maiden or former) name of

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

- ☐ Respondent is granted restoration of their (maiden or former) name of

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

## Other Orders

25. Check if applicable.

- ☐ Other orders are as per the attached Exhibit \_\_\_\_\_, which is incorporated by reference as if fully set forth herein.

## Court Costs

26. Check one of the two boxes.

- ☐ Court costs are to be paid from the court cost deposit(s) previously posted.  
☐ Court costs are waived.

## Waiver of Right to Rehearing (If case is heard by a Commissioner pursuant to §487.010, RSMo, et seq.)

We, the undersigned parties, do hereby acknowledge receipt of the findings and recommendations of the commissioner and waive the right to file a motion for rehearing in this case.

- ☐ Signature of Petitioner's Attorney \_\_\_\_\_  
☐ Signature of Respondent's Attorney \_\_\_\_\_  
☐ Signature of Guardian ad Litem \_\_\_\_\_  
☐ Signature of Petitioner \_\_\_\_\_  
☐ Signature of Respondent \_\_\_\_\_  
☐ Signature of Third Party \_\_\_\_\_

<p><i>(If heard by a Family Court Judge)</i></p>   <p>_____ (Judge)</p>  <p>_____ (Date)</p>	<p><i>(If heard by a Family Court Commissioner)</i></p> <p>Findings and Recommendations of Commissioner:</p>  <p>_____ (Commissioner)</p> <p>_____ (Date)</p> <p>All orders and these findings and recommendations of the Commissioner are confirmed and adopted as the judgment of the court.</p>  <p>_____ (Judge)</p> <p>_____ (Date)</p>
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A certified copy of this judgment is to be mailed to the following person(s): *(Check all applicable boxes)*

<input type="checkbox"/> _____ (Print Name of Petitioner's Attorney)	<input type="checkbox"/> _____ (Print Name of Respondent's Attorney)	<input type="checkbox"/> _____ (Print Name of Guardian ad Litem)
_____ (Street)	_____ (Street)	_____ (Street)
_____ (City, State, Zip)	_____ (City, State, Zip)	_____ (City, State, Zip)
_____ (Telephone Number with Area Code)	_____ (Telephone Number with Area Code)	_____ (Telephone Number with Area Code)
<input type="checkbox"/> _____ (Print Name of Petitioner)	<input type="checkbox"/> _____ (Print Name of Respondent)	<input type="checkbox"/> _____ (Print Name of Third Party)
_____ (Street)	_____ (Street)	_____ (Street)
_____ (City, State, Zip)	_____ (City, State, Zip)	_____ (City, State, Zip)
_____ (Telephone Number with Area Code)	_____ (Telephone Number with Area Code)	_____ (Telephone Number with Area Code)

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter full legal name of Petitioner above)

**-and-**

The MINOR CHILD(REN) as listed  
in question 1 of the *Petition for Declaration  
of Paternity, Custody and Support*,  
By Next Friend,

**v.**

Respondents shall be listed in the order used in question 6 of the *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 1**, (Enter full legal name of Respondent 1 above)

**-and-**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 2**, (Enter full legal name of Respondent 2 above)

**-and-**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 3**. (Enter full legal name of Respondent 3 above)

**Case**

**Number** \_\_\_\_\_

(Use number on Petition)

**Division**

**Number** \_\_\_\_\_

(Use number on Petition)

**Statement of Income and Expenses**  
**(For use in Paternity Action)**

**Monthly Income Information**

Petitioner

Respondent

1. Monthly gross income from salaries, wages and commissions including bonuses
2. Monthly self-employment income
3. Monthly social security benefits not including Supplemental Security Income (SSI)
4. Monthly retirement benefits

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Monthly Income Information (Continued)

Petitioner

Respondent

5. Monthly pension income
6. Monthly interest income
7. Monthly trust and annuity income
8. Monthly income from dividends and partnership distributions
9. Monthly unemployment compensation benefits
10. Monthly severance pay
11. Monthly workers compensation benefits
12. Monthly disability insurance benefits
13. Monthly veterans disability benefits
14. Monthly military allowances for subsistence and quarters
15. **Total monthly gross income. Add paragraphs 1 through 14.** (Form 14 - Line 1)
16. Monthly Supplemental Security Income benefits (SSI)
17. Monthly payments of Temporary Assistance for Needy Families (TANF)
18. Monthly Medicaid benefits
19. Monthly food stamps
20. Number of unemancipated children who are **not** the subject of this proceeding that primarily reside with each party (Form 14 - Line 2c(1))  
  
Monthly amount of child support received pursuant to a court or administrative order for unemancipated children who are **not** the subject of this proceeding that primarily reside with each party (Form 14 - Line 2c(3))
21. Monthly maintenance received in **this** case
22. Monthly maintenance received in **other** cases
23. **Total monthly court-ordered maintenance received. Add paragraphs 21 and 22.** (Form 14 - Line 1a)

[illegible]



**Monthly Expense Information**

Petitioner

Respondent

24. Monthly court- or administratively-ordered child support being paid for children who are **not** the subject of this proceeding (Form 14 - Line 2a)

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25. Monthly Maintenance

a. Monthly maintenance paid in **this** case

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b. Monthly maintenance paid in **other** cases

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**Total monthly court-ordered maintenance paid. Add paragraphs 25a and 25b. (Form 14 - Line 2b)**

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26. Reasonable monthly work-related child care costs of each party for the children who are the subject of this proceeding (Form 14 - Line 6a and Line 6b)

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27. Monthly health insurance costs for the children who are the subject of this proceeding (Form 14 - Line 6c)

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28. Monthly uninsured extraordinary medical costs for the children who are the subject of this proceeding (Form 14 - Line 6d)

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29. Other monthly extraordinary child rearing costs for the children who are the subject of this proceeding (Form 14 - Line 6e)

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30. All other monthly expenses of each person (Include housing costs, utilities, transportation costs, food, clothing, loan payments, charitable contributions, entertainment, insurance other than listed on line 27, etc.)

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31. **Total monthly expenses. Add paragraphs 24 through 30. (Do not include 25a and 25b. Use the total amounts from 25.)**

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You **must** send (serve) a copy of this document to each of the other parties, or their attorney(s). To obtain service, you may deliver the document by hand; send it by First Class U.S. mail, e-mail or facsimile (fax); or leave it at the office of the party's attorney to be served with a clerk, receptionist or an attorney associated with the attorney to be served.

Name	Address: U.S. mail/e-mail/fax number

\_\_\_\_\_, of lawful age, being duly sworn on his or her oath, states that he or she is the person named below and that the facts stated in this *Statement of Income and Expenses (For use in Paternity Action)* are true according to his or her best knowledge, information and belief.

The following information must be completed by a notary public.

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared, \_\_\_\_\_, to me known to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same as his/her free act and deed.

\_\_\_\_\_, Notary Public  
County, State of Missouri

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This form is available for free at [www.selfrepresent.mo.gov](http://www.selfrepresent.mo.gov)

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner,** (Enter full legal name of Petitioner above)

**v.**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

(Enter full legal name of Mother above)

**-and-**

The MINOR CHILD(REN) as listed  
in question 1 of the *Presumed Father's Petition*  
for Declaration of Non-Paternity,

**Respondents.**

**Case  
Number** \_\_\_\_\_

(Use number on Petition)

**Division  
Number** \_\_\_\_\_

(Use number on Petition)

**Statement of Income and Expenses**  
**(For use in Presumed Father's Non-Paternity Action)**

**Monthly Income Information**

Petitioner

Respondent

1. Monthly gross income from salaries, wages and commissions including bonuses
2. Monthly self-employment income
3. Monthly social security benefits not including Supplemental Security Income (SSI)
4. Monthly retirement benefits

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Monthly Income Information (Continued)**

Petitioner

Respondent

5. Monthly pension income	<hr/>	<hr/>
6. Monthly interest income	<hr/>	<hr/>
7. Monthly trust and annuity income	<hr/>	<hr/>
8. Monthly income from dividends and partnership distributions	<hr/>	<hr/>
9. Monthly unemployment compensation benefits	<hr/>	<hr/>
10. Monthly severance pay	<hr/>	<hr/>
11. Monthly workers compensation benefits	<hr/>	<hr/>
12. Monthly disability insurance benefits	<hr/>	<hr/>
13. Monthly veterans disability benefits	<hr/>	<hr/>
14. Monthly military allowances for subsistence and quarters	<hr/>	<hr/>
15. <b>Total monthly gross income. Add paragraphs 1 through 14.</b> (Form 14 - Line 1)	<hr/>	<hr/>
16. Monthly Supplemental Security Income benefits (SSI)	<hr/>	<hr/>
17. Monthly payments of Temporary Assistance for Needy Families (TANF)	<hr/>	<hr/>
18. Monthly Medicaid benefits	<hr/>	<hr/>
19. Monthly food stamps	<hr/>	<hr/>
20. Number of unemancipated children who are <b>not</b> the subject of this proceeding that primarily reside with each party (Form 14 - Line 2c(1))	<hr/>	<hr/>
Monthly amount of child support received pursuant to a court or administrative order for unemancipated children who are <b>not</b> the subject of this proceeding that primarily reside with each party (Form 14 - Line 2c(3))	<hr/>	<hr/>
21. Monthly maintenance received in <b>this</b> case	<hr/>	<hr/>
22. Monthly maintenance received in <b>other</b> cases	<hr/>	<hr/>
23. <b>Total monthly court-ordered maintenance received. Add paragraphs 21 and 22.</b> (Form 14 - Line 1a)	<hr/>	<hr/>

**Monthly Expense Information**

Petitioner

Respondent

24. Monthly court- or administratively-ordered child support being paid for children who are **not** the subject of this proceeding (Form 14 - Line 2a)

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25. Monthly Maintenance

a. Monthly maintenance paid in **this** case

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b. Monthly maintenance paid in **other** cases

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**Total monthly court-ordered maintenance paid.  
Add paragraphs 25a and 25b. (Form 14 - Line 2b)**

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26. Reasonable monthly work-related child care costs of each party for the children who are the subject of this proceeding (Form 14 - Line 6a and Line 6b)

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27. Monthly health insurance costs for the children who are the subject of this proceeding (Form 14 - Line 6c)

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28. Monthly uninsured extraordinary medical costs for the children who are the subject of this proceeding (Form 14 - Line 6d)

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29. Other monthly extraordinary child rearing costs for the children who are the subject of this proceeding (Form 14 - Line 6e)

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30. All other monthly expenses of each person (Include housing costs, utilities, transportation costs, food, clothing, loan payments, charitable contributions, entertainment, insurance other than listed on line 27, etc.)

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31. **Total monthly expenses. Add paragraphs 24 through 30. (Do not include 25a and 25b. Use the total amounts from 25.)**

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## Proof of Service on Other Parties

You **must** send (serve) a copy of this document to each of the other parties, or their attorney(s). To obtain service, you may deliver the document by hand; send it by First Class U.S. mail, e-mail or facsimile (fax); or leave it at the office of the party's attorney to be served with a clerk, receptionist or an attorney associated with the attorney to be served.

I certify, under oath that on \_\_\_\_\_ (date) I have sent/given a copy of this *Statement of Income and Expenses (For use in Presumed Father's Non-Paternity Action)* to each of the following parties at the address shown:

Name	Address: U.S. mail/e-mail/fax number

**Sign Below in the Presence of a Notary Public**

\_\_\_\_\_, of lawful age, being duly sworn on his or her oath, states that he or she is the person named below and that the facts stated in this *Statement of Income and Expenses (For use in Presumed Father's Non-Paternity Action)* are true according to his or her best knowledge, information and belief.



*(Sign above in the presence of a Notary Public)*

*(Print your name above)*

The following information must be completed by a notary public.

STATE OF \_\_\_\_\_ )  
 ) SS  
COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared, \_\_\_\_\_, to me known to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same as his/her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the County and State aforesaid, the day and year first above written.

\_\_\_\_\_, Notary Public  
County, State of Missouri

My commission expires: \_\_\_\_\_

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter your full legal name above)

-and-

The MINOR CHILD(REN) as listed  
in question 1 of the *Father's Petition for Declaration of Paternity,  
Custody and Support*,  
By Next Friend,

v.

Respondents shall be listed in the order used in question 6 of this *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 1**, (Enter full legal name of Respondent 1 above)

-and-

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 2**, (Enter full legal name of Respondent 2 above)

-and-

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 3**. (Enter full legal name of Respondent 3 above)

**Case  
Number** \_\_\_\_\_

(Will be assigned when case is filed)

**Division  
Number** \_\_\_\_\_

(Will be assigned when case is filed)

## Father's Petition for Declaration of Paternity, Custody and Support

### The Parties

This *Petition* is for a father to ask the court to declare him to be the father of a child or children. All of the children listed in this *Petition* must have the same mother. If you want to ask the court to decide paternity of the child(ren) of a different mother, you must file a separate petition. Throughout this case you will always be referred to as the Petitioner. The other parties will be referred to as Respondent(s).

1. I ask the court to find I am the father of the following child(ren):

a. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

b. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

c. \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

d. \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

e. \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

f. \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

2. The name of the mother of the minor child(ren) is

\_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

3. Was the mother married to a man at the time she became pregnant with any child(ren) listed in this *Petition*? (Check one of the two boxes)

☐ Yes ☐ No

If yes, who was she married to?

\_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

4. Was the mother married to a man at the time any children listed in this *Petition* were born? (Check one of the two boxes)

☐ Yes ☐ No

If yes, who was she married to?

\_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

5. An acknowledgment of paternity is an affidavit that the parents sign to put a father on a child's birth certificate. Did any man sign an acknowledgment of paternity for the child(ren) listed in this *Petition* at the hospital or at any other time? (Check one of the two boxes)

☐ Yes ☐ No

If yes, who listed himself as the father on the acknowledgment of paternity or birth certificate?  
 (Check one of the two boxes)

☐ I did.

☐ Someone else did.

\_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

6. List the names of all persons you named in questions 2, 3, 4 and 5. These persons are the Respondents to this *Petition*. Do not list yourself in response to this question.

**If you list more than 3 different persons in response to questions 2, 3, 4 and 5**, attach additional pages answering the questions 15 through 23 of this *Petition* for each additional Respondent. You must also attach additional Directions for Service pages (available on page 9 of this *Petition*) for each additional Respondent.

Respondent 1 -

\_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

Respondent 2 -

\_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

Respondent 3 -

\_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)



## Information about Petitioner

(Enter your name on the lines)

(First Name)

(Middle Name)

(Last Name)

(Jr./Sr./III)

### 7. What is your mailing address?

This is the address the court will use to send information about your case to you. If you move during the time this case is pending, you must send a letter to the court notifying it of your new address. This address is not necessarily the same as the address at which you live. Even if you do not wish to give the address at which you live, you **must** still give the court a mailing address. Because court actions are a matter of public record, the address you list will be available to the public.

(Street)

(City)

(State)

(Zip)

( )

(Telephone Number with Area Code)

(E-mail Address Optional)

### 8. What are the last four numbers of your social security number?

XXX-XX- \_\_\_\_\_

### 9. Are you over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

### 10. I live in ☐ the United States ☐ another country, which is \_\_\_\_\_.

### 11. I live in ☐ Missouri ☐ another state, which is \_\_\_\_\_.

### 12. I live in the county of \_\_\_\_\_.

City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank.

### 13. What is your current employment status? (Check one of the three boxes)

☐ Employed ☐ Unemployed ☐ Self-employed

### 14. If you are employed or self-employed, where do you currently work?

If you are self-employed, enter a brief description of the type of work you perform such as "Landscaping" or "Day care" on the line for the name of your employer. If you are self-employed, you should also enter the address information for your self-employment.

(Employer's name or type of self-employment)

(Street)

(City)

(State)

(Zip)

## Information about Respondent 1

Provide information for Respondent 1 as listed in response to question 6 of this *Petition*. Respondents shall be listed in the order used in question 6 of this *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
(Enter the full legal name of Respondent 1 on the lines above)

### 15. What is Respondent 1's mailing address?

This is the address that the court will use to send information about your case to this Respondent. If you do not know this Respondent's current address, you should enter this Respondent's last known address.

\_\_\_\_\_  
(Street)  
  
\_\_\_\_\_  
(City) (State) (Zip)  
( )  
\_\_\_\_\_  
(Telephone Number with Area Code) (E-mail Address - Optional)

### 16. What are the last four numbers of Respondent 1's social security number?

Do not leave this field blank. If you do not know this Respondent's social security number, enter "Unknown" in this field.

XXX-XX- \_\_\_\_\_

### 17. Is Respondent 1 over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

### 18. Respondent 1 lives in ☐ the United States ☐ another country, which is \_\_\_\_\_

.

### 19. Respondent 1 lives in ☐ Missouri ☐ another state, which is \_\_\_\_\_

.

### 20. Respondent 1 lives in the county of \_\_\_\_\_

City of Saint Louis is considered a county. If this Respondent lives in the city of Saint Louis, you should write "Saint Louis city" in the blank.

### 21. Respondent 1 is currently ☐ employed ☐ unemployed ☐ self-employed ☐ employment unknown. (Check one of the four boxes)

### 22. If Respondent 1 is employed or self-employed, where do they currently work?

If this Respondent is self-employed, enter a brief description of the type of work they perform, such as "Landscaping" or "Day care," on the line for the name of the employer. If this Respondent is self-employed you should also enter the address information for their self-employment.

\_\_\_\_\_  
(Employer's name or type of self-employment)  
  
\_\_\_\_\_  
(Street)  
  
\_\_\_\_\_  
(City) (State) (Zip)

### 23. Respondent 1 ☐ is ☐ is **not** on active duty in the military. (Check "is" or "is not")

If this Respondent is on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may prevent you from getting a judgment without this Respondent's consent. You should contact a lawyer about this situation prior to filing this *Petition*.



## Information about Respondent 2

Provide information for Respondent 2 as listed in response to question 6 of this *Petition*. Respondents shall be listed in the order used in question 6 of this *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
(Enter the full legal name of Respondent 2 on the lines above)

### 24. What is Respondent 2's mailing address?

This is the address that the court will use to send information about your case to this Respondent. If you do not know this Respondent's current address, you should enter this Respondent's last known address.

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

( )  
(Telephone Number with Area Code) (E-mail Address - Optional)

### 25. What are the last four numbers of Respondent 2's social security number?

Do not leave this field blank. If you do not know this Respondent's social security number, enter "Unknown" in this field.

XXX-XX- \_\_\_\_\_

### 26. Is Respondent 2 over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

### 27. Respondent 2 lives in ☐ the United States ☐ another country, which is \_\_\_\_\_

.

### 28. Respondent 2 lives in ☐ Missouri ☐ another state, which is \_\_\_\_\_

.

### 29. Respondent 2 lives in the county of \_\_\_\_\_

City of Saint Louis is considered a county. If this Respondent lives in the city of Saint Louis, you should write "Saint Louis city" in the blank.

### 30. Respondent 2 is currently ☐ employed ☐ unemployed ☐ self-employed ☐ employment unknown. (Check one of the four boxes)

### 31. If Respondent 2 is employed or self-employed, where do they currently work?

If this Respondent is self-employed, enter a brief description of the type of work they perform, such as "Landscaping" or "Day care," on the line for the name of the employer. If this Respondent is self-employed you should also enter the address information for their self-employment.

\_\_\_\_\_  
(Employer's name or type of self-employment)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

### 32. Respondent 2 ☐ is ☐ is **not** on active duty in the military. (Check "is" or "is not")

If this Respondent is on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may prevent you from getting a judgment without this Respondent's consent. You should contact a lawyer about this situation prior to filing this *Petition*.



### Information about Respondent 3

Provide information for Respondent 3 as listed in response to question 6 of this *Petition*. Respondents shall be listed in the order used in question 6 of this *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
(Enter the full legal name of Respondent 3 on the lines above)

#### 33. What is Respondent 3's mailing address?

This is the address that the court will use to send information about your case to this Respondent. If you do not know this Respondent's current address, you should enter this Respondent's last known address.

\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip)  
( )  
\_\_\_\_\_  
(Telephone Number with Area Code) (E-mail Address - Optional)

#### 34. What are the last four numbers of Respondent 3's social security number?

Do not leave this field blank. If you do not know this Respondent's social security number, enter "Unknown" in this field.

XXX-XX- \_\_\_\_\_

#### 35. Is Respondent 3 over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

#### 36. Respondent 3 lives in ☐ the United States ☐ another country, which is \_\_\_\_\_

#### 37. Respondent 3 lives in ☐ Missouri ☐ another state, which is \_\_\_\_\_

#### 38. Respondent 3 lives in the county of \_\_\_\_\_

City of Saint Louis is considered a county. If this Respondent lives in the city of Saint Louis, you should write "Saint Louis city" in the blank.

#### 39. Respondent 3 is currently ☐ employed ☐ unemployed ☐ self-employed ☐ employment unknown. (Check one of the four boxes)

#### 40. If Respondent 3 is employed or self-employed, where do they currently work?

If this Respondent is self-employed, enter a brief description of the type of work they perform, such as "Landscaping" or "Day care," on the line for the name of the employer. If this Respondent is self-employed you should also enter the address information for their self-employment.

\_\_\_\_\_  
(Employer's name or type of self-employment)  
\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip)

#### 41. Respondent 3 ☐ is ☐ is **not** on active duty in the military. (Check "is" or "is not")

If this Respondent is on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act

(SCRA) may prevent you from getting a judgment without this Respondent's consent. You should contact a lawyer about this situation prior to filing this *Petition*.

## Information about the Children

42. List the name of the parent or guardian with whom the children have lived and the address where said children have lived during the past five years. Enter the dates at each address. If the child(ren) have lived at more than three addresses in the past five years, attach an additional page to this *Petition* listing the information requested in question 42 for each additional address.

(1) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) (Dates)

(2) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) (Dates)

(3) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) (Dates)

43. Do you know of anyone other than you or the other parent who has physical custody of any of the children or claims to have custody or visitation rights with respect to any of the children? (*Check one of the two boxes*)

☐ Yes ☐ No

44. Do you have information about any other custody proceeding concerning any of the children pending in a court of this or any other state? (*Check one of the two boxes*)

☐ Yes ☐ No

45. Have you participated in other litigation concerning the custody of any of the children in this or any other state? (*Check one of the two boxes*)

☐ Yes ☐ No

46. Have any of the children been a victim of abuse or neglect? (*Check one of the two boxes*)

☐ Yes ☐ No

47. If you answered "Yes" to questions 43, 44, 45 or 46, please explain.

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48. Has the Family Support Division opened a child support case for any child(ren) listed in this *Petition*? (Check one of the two boxes)

☐ Yes ☐ No

If yes, list the eight digit IV-D number(s). \_\_\_\_\_

If yes, has the Family Support Division issued a child support order? (Check one of the two boxes)

☐ Yes ☐ No

List the judicial case number(s). \_\_\_\_\_

49. Do any of the children listed in this *Petition* currently receive Temporary Assistance for Needy Families (TANF) benefits through the Family Support Division, or have they received TANF benefits in the past? (Check one of the two boxes)

☐ Yes ☐ No

If yes, you must serve the Family Support Division with a copy of *Father's Petition for Declaration of Paternity, Custody and Support* and other forms filed with this *Petition*. Instructions on how to serve the Family Support Division are listed on page 12 of this *Petition*.

## Request for Relief

I am requesting to be declared the father of the child(ren) listed in question 1 of this *Petition* and that any other persons listed in questions 3 through 5 be excluded as the father of the child(ren).

I also want the court to do the following: (Check all that apply)

- ☐ Child Custody should be as set forth in Part A of the attached *Parenting Plan* marked Exhibit \_\_\_\_\_. The custody arrangement that is in the best interests of the minor children is set forth in Part A of the attached *Parenting Plan* marked Exhibit \_\_\_\_\_.  
☐ Child Support should be as set forth in Part B of the attached *Parenting Plan* marked Exhibit \_\_\_\_\_.  
☐ I want to change the child(ren)'s names as follows:

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- ☐ Other (Please state the other request(s))

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**Directions for Service on Respondent 1** (Enter the name of Respondent 1 on the lines below)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**You must fill out Directions for Service on each person listed in response to question 6 of this Petition.**

**Check one of the following service options:**

- ☐ Respondent 1 has signed a verified *Answer to Petition for Declaration of Paternity, Custody and Support*, which is being filed with the *Father's Petition for Declaration of Paternity, Custody and Support*. Therefore, do not issue a summons.

If you check this box, you must file the *Answer to Petition for Declaration of Paternity, Custody and Support* at the same time you file this *Petition*. The *Answer* must be signed by Respondent 1 in front of a notary public.

- ☐ Respondent 1 should be served with a summons at their home:

Respondent 1 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 1 served, you must file another copy of all your documents in this case to be served on Respondent 1.**

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 1 should be served with a summons at their place of employment:

Respondent 1 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 1 served, you must file another copy of all your documents in this case to be served on Respondent 1.**

\_\_\_\_\_  
(Employer's Name) (Hours of Employment)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 1 cannot be served in Missouri. Therefore, service by registered mail is requested. A copy of the *Affidavit for Service by Mail* is attached to this form. See Missouri Supreme Court Rule 54.12(b).

**If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.**

**Directions for Service on Respondent 2** (Enter the name of Respondent 2 on the lines below)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**You must fill out Directions for Service on each person listed in response to question 6 of this Petition.**

**Check one of the following service options:**

- ☐ Respondent 2 has signed a verified *Answer to Petition for Declaration of Paternity, Custody and Support*, which is being filed with the *Father's Petition for Declaration of Paternity, Custody and Support*. Therefore, do not issue a summons.

If you check this box, you must file the *Answer to Petition for Declaration of Paternity, Custody and Support* at the same time you file this *Petition*. The *Answer* must be signed by Respondent 2 in front of a notary public.

- ☐ Respondent 2 should be served with a summons at their home:

Respondent 2 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 2 served, you must file another copy of all your documents in this case to be served on Respondent 2.**

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 2 should be served with a summons at their place of employment:

Respondent 2 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 2 served, you must file another copy of all your documents in this case to be served on Respondent 2.**

\_\_\_\_\_  
(Employer's Name) (Hours of Employment)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 2 cannot be served in Missouri. Therefore, service by registered mail is requested. A copy of the *Affidavit for Service by Mail* is attached to this form. See Missouri Supreme Court Rule 54.12(b).

**If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.**

**Directions for Service on Respondent 3** (Enter the name of Respondent 3 on the lines below)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**You must fill out Directions for Service on each person listed in response to question 6 of this Petition.**

**Check one of the following service options:**

- ☐ Respondent 3 has signed a verified *Answer to Petition for Declaration of Paternity, Custody and Support*, which is being filed with the *Father's Petition for Declaration of Paternity, Custody and Support*. Therefore, do not issue a summons.

If you check this box, you must file the *Answer to Petition for Declaration of Paternity, Custody and Support* at the same time you file this *Petition*. The *Answer* must be signed by Respondent 3 in front of a notary public.

- ☐ Respondent 3 should be served with a summons at their home:

Respondent 3 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 3 served, you must file another copy of all your documents in this case to be served on Respondent 3.**

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 3 should be served with a summons at their place of employment:

Respondent 3 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 3 served, you must file another copy of all your documents in this case to be served on Respondent 3.**

\_\_\_\_\_  
(Employer's Name) (Hours of Employment)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 3 cannot be served in Missouri. Therefore, service by registered mail is requested. A copy of the *Affidavit for Service by Mail* is attached to this form. See Missouri Supreme Court Rule 54.12(b).

**If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.**

## Service on Family Support Division (if necessary)

If any child listed in this *Petition* receives Temporary Assistance for Needy Families (TANF) benefits, you must serve the Family Support Division with a copy of your *Petition* and *Parenting Plan*.

- ☐ The child(ren) receive TANF benefits through the Family Support Division. The Family Support Division shall be served at the following address:

Director, Family Support Division  
615 Howerton Court  
Jefferson City, Missouri 65102

## Sign Below in the Presence of a Notary Public

Your *Father's Petition for Declaration of Paternity, Custody and Support* is required to be verified in the presence of a notary public.

Petitioner, of lawful age, being duly sworn on his or her oath, states that he or she is the Petitioner named above and that the facts stated in the *Father's Petition for Declaration of Paternity, Custody and Support* are true according to his or her best knowledge, information and belief.

► \_\_\_\_\_  
(Sign above in the presence of a Notary Public) (Print your name above)

The following information must be completed by a notary public.

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ ) SS

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, to me known to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same as his/her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the County and State aforesaid, the day and year first above written.

\_\_\_\_\_  
\_\_\_\_\_, Notary Public  
\_\_\_\_\_ County, State of Missouri

My commission expires: \_\_\_\_\_

## Attorney Information

This information may be completed by your attorney. Do not enter any information here if you are filing this case without the assistance of an attorney.

☐ I have assisted Petitioner in the preparation of these pleadings, but I am not entering my appearance on behalf of Petitioner.

\_\_\_\_\_  
(Attorney - Sign above)

\_\_\_\_\_  
(Missouri Bar Number)

\_\_\_\_\_  
(Attorney - Print your name above)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip)

(       )

(       )

\_\_\_\_\_  
(Telephone Number with Area Code)

\_\_\_\_\_  
(Fax Number with Area Code)

\_\_\_\_\_  
(E-mail Address - Optional)

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter your full legal name above)

**-and-**

The MINOR CHILD(REN) as listed  
in question 1 of the *Mother's Petition for Declaration of Paternity,  
Custody and Support*,  
By Next Friend,

**v.**

Respondents shall be listed in the order used in question 6 of this *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 1**, (Enter full legal name of Respondent 1 above)

**-and-**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 2**, (Enter full legal name of Respondent 2 above)

**-and-**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 3**. (Enter full legal name of Respondent 3 above)

**Case  
Number** \_\_\_\_\_

(Will be assigned when case is filed)

**Division  
Number** \_\_\_\_\_

(Will be assigned when case is filed)

## Mother's Petition for Declaration of Paternity, Custody and Support

### The Parties

This *Petition* is for a mother to ask the court to determine who is the father of her child(ren). A mother must file a separate *Mother's Petition for Declaration of Paternity, Custody and Support* for each father of her children. Throughout this case you will always be referred to as the Petitioner. The other parties will be referred to as Respondent(s).

1. I ask the court to determine paternity for the following child(ren):

a. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

b. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

c. \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

d. \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

e. \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

f. \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

2. I ask this court to find \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
 is the father of the child(ren) listed in this *Petition*.

3. Were you married to a man at the time you became pregnant with any child(ren) listed in this *Petition*? (Check one of the two boxes)

☐ Yes ☐ No

If yes, who were you married to? \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

4. Were you married to a man at the time any of the children listed in this *Petition* were born? (Check one of the two boxes)

☐ Yes ☐ No

If yes, who were you married to? \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

5. An acknowledgment of paternity is an affidavit that the parents sign to put a father on a child's birth certificate. Did any man sign an acknowledgment of paternity for the child(ren) listed in this *Petition* at the hospital or at any other time? (Check one of the two boxes)

☐ Yes ☐ No

If yes, who listed himself as the father on the acknowledgment of paternity or birth certificate?

\_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

6. List the names of all men you named in questions 2, 3, 4 and 5. These persons are the Respondents to this *Petition*.

**If you list more than 3 different persons in response to questions 2, 3, 4 and 5**, attach additional pages answering the questions 15 through 23 of this *Petition* for each additional Respondent. You must also attach additional Directions for Service pages (available on page 9 of this *Petition*) for each additional Respondent.

Respondent 1 - \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

Respondent 2 - \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

Respondent 3 - \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III)



## Information about Petitioner

(Enter your name on the lines)

(First Name)

(Middle Name)

(Last Name)

(Jr./Sr./III)

### 7. What is your mailing address?

This is the address the court will use to send information about your case to you. If you move during the time this case is pending, you must send a letter to the court notifying it of your new address. This address is not necessarily the same as the address at which you live. Even if you do not wish to give the address at which you live, you **must** still give the court a mailing address. Because court actions are a matter of public record, the address you list will be available to the public.

(Street)

(City)

(State)

(Zip)

( )

(Telephone Number with Area Code)

(E-mail Address - Optional)

### 8. What are the last four numbers of your social security number?

XXX-XX- \_\_\_\_\_

### 9. Are you over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

### 10. I live in ☐ the United States ☐ another country, which is \_\_\_\_\_.

### 11. I live in ☐ Missouri ☐ another state, which is \_\_\_\_\_.

### 12. I live in the county of \_\_\_\_\_.

City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank.

### 13. What is your current employment status? (Check one of the three boxes)

☐ Employed ☐ Unemployed ☐ Self-employed

### 14. If you are employed or self-employed, where do you currently work?

If you are self-employed, enter a brief description of the type of work you perform such as "Landscaping" or "Day care" on the line for the name of your employer. If you are self-employed, you should also enter the address information for your self-employment.

(Employer's name or type of self-employment)

(Street)

(City)

(State)

(Zip)

## Information about Respondent 1

Provide information for Respondent 1 as listed in response to question 6 of this *Petition*. Respondents shall be listed in the order used in question 6 of this *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
(Enter the full legal name of Respondent 1 on the lines above)

### 15. What is Respondent 1's mailing address?

This is the address that the court will use to send information about your case to this Respondent. If you do not know this Respondent's current address, you should enter this Respondent's last known address.

\_\_\_\_\_  
(Street)  
  
\_\_\_\_\_  
(City) (State) (Zip)  
( )  
\_\_\_\_\_  
(Telephone Number with Area Code) (E-mail Address - Optional)

### 16. What are the last four numbers of Respondent 1's social security number?

Do not leave this field blank. If you do not know this Respondent's social security number, enter "Unknown" in this field.

XXX-XX- \_\_\_\_\_

### 17. Is Respondent 1 over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

### 18. Respondent 1 lives in ☐ the United States ☐ another country, which is \_\_\_\_\_

.

### 19. Respondent 1 lives in ☐ Missouri ☐ another state, which is \_\_\_\_\_

.

### 20. Respondent 1 lives in the county of \_\_\_\_\_

City of Saint Louis is considered a county. If this Respondent lives in the city of Saint Louis, you should write "Saint Louis city" in the blank.

### 21. Respondent 1 is currently ☐ employed ☐ unemployed ☐ self-employed ☐ employment unknown. (Check one of the four boxes)

### 22. If Respondent 1 is employed or self-employed, where do they currently work?

If this Respondent is self-employed, enter a brief description of the type of work they perform, such as "Landscaping" or "Day care," on the line for the name of the employer. If this Respondent is self-employed you should also enter the address information for their self-employment.

\_\_\_\_\_  
(Employer's name or type of self-employment)  
  
\_\_\_\_\_  
(Street)  
  
\_\_\_\_\_  
(City) (State) (Zip)

### 23. Respondent 1 ☐ is ☐ is **not** on active duty in the military. (Check "is" or "is not")

If this Respondent is on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may prevent you from getting a judgment without this Respondent's consent. You should contact a lawyer about this situation prior to filing this *Petition*.



## Information about Respondent 2

Provide information for Respondent 2 as listed in response to question 6 of this *Petition*. Respondents shall be listed in the order used in question 6 of this *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
(Enter the full legal name of Respondent 2 on the lines above)

### 24. What is Respondent 2's mailing address?

This is the address that the court will use to send information about your case to this Respondent. If you do not know this Respondent's current address, you should enter this Respondent's last known address.

\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip)  
( )  
\_\_\_\_\_  
(Telephone Number with Area Code) (E-mail Address - Optional)

### 25. What are the last four numbers of Respondent 2's social security number?

Do not leave this field blank. If you do not know this Respondent's social security number, enter "Unknown" in this field.

XXX-XX- \_\_\_\_\_

### 26. Is Respondent 2 over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

### 27. Respondent 2 lives in ☐ the United States ☐ another country, which is \_\_\_\_\_

.

### 28. Respondent 2 lives in ☐ Missouri ☐ another state, which is \_\_\_\_\_ .

### 29. Respondent 2 lives in the county of \_\_\_\_\_ .

City of Saint Louis is considered a county. If this Respondent lives in the city of Saint Louis, you should write "Saint Louis city" in the blank.

### 30. Respondent 2 is currently ☐ employed ☐ unemployed ☐ self-employed ☐ employment unknown. (Check one of the four boxes)

### 31. If Respondent 2 is employed or self-employed, where do they currently work?

If this Respondent is self-employed, enter a brief description of the type of work they perform, such as "Landscaping" or "Day care," on the line for the name of the employer. If this Respondent is self-employed you should also enter the address information for their self-employment.

\_\_\_\_\_  
(Employer's name or type of self-employment)  
\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip)

### 32. Respondent 2 ☐ is ☐ is **not** on active duty in the military. (Check "is" or "is not")

If this Respondent is on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may prevent you from getting a judgment without this Respondent's consent. You should contact a lawyer about this situation prior to filing this *Petition*.



### Information about Respondent 3

Provide information for Respondent 3 as listed in response to question 6 of this *Petition*. Respondents shall be listed in the order used in question 6 of this *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
(Enter the full legal name of Respondent 3 on the lines above)

#### 33. What is Respondent 3's mailing address?

This is the address that the court will use to send information about your case to this Respondent. If you do not know this Respondent's current address, you should enter this Respondent's last known address.

\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip)  
( )  
\_\_\_\_\_  
(Telephone Number with Area Code) (E-mail Address - Optional)

#### 34. What are the last four numbers of Respondent 3's social security number?

Do not leave this field blank. If you do not know this Respondent's social security number, enter "Unknown" in this field.

XXX-XX- \_\_\_\_\_

#### 35. Is Respondent 3 over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

#### 36. Respondent 3 lives in ☐ the United States ☐ another country, which is \_\_\_\_\_

.

#### 37. Respondent 3 lives in ☐ Missouri ☐ another state, which is \_\_\_\_\_

.

#### 38. Respondent 3 lives in the county of \_\_\_\_\_

City of Saint Louis is considered a county. If this Respondent lives in the city of Saint Louis, you should write "Saint Louis city" in the blank.

#### 39. Respondent 3 is currently ☐ employed ☐ unemployed ☐ self-employed ☐ employment unknown. (Check one of the four boxes)

#### 40. If Respondent 3 is employed or self-employed, where do they currently work?

If this Respondent is self-employed, enter a brief description of the type of work they perform, such as "Landscaping" or "Day care," on the line for the name of the employer. If this Respondent is self-employed you should also enter the address information for their self-employment.

\_\_\_\_\_  
(Employer's name or type of self-employment)  
\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip)

#### 41. Respondent 3 ☐ is ☐ is **not** on active duty in the military. (Check "is" or "is not")

If this Respondent is on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may prevent you from getting a judgment without this Respondent's consent. You should contact a lawyer about this situation prior to filing this *Petition*.



## Information about the Children

42. List the name of the parent or guardian with whom the children have lived and the address where said children have lived during the past five years. Enter the dates at each address. If the child(ren) have lived at more than three addresses in the past five years, attach an additional page to this *Petition* listing the information requested in question 42 for each additional address.

(1) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) (Dates)

(2) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) (Dates)

(3) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) (Dates)

43. Do you know of anyone other than you or the other parent who has physical custody of any of the children or claims to have custody or visitation rights with respect to any of the children? *(Check one of the two boxes)*

☐ Yes ☐ No

44. Do you have information about any other custody proceeding concerning any of the children pending in a court of this or any other state? *(Check one of the two boxes)*

☐ Yes ☐ No

45. Have you participated in other litigation concerning the custody of any of the children in this or any other state? *(Check one of the two boxes)*

☐ Yes ☐ No

46. Have any of the children been a victim of abuse or neglect? *(Check one of the two boxes)*

☐ Yes ☐ No

47. If you answered "Yes" to questions 43, 44, 45 or 46, please explain.

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48. Has the Family Support Division opened a child support case for any child(ren) listed in this *Petition*? (Check one of the two boxes)

☐ Yes ☐ No

If yes, list the eight digit IV-D number(s). \_\_\_\_\_

If yes, has the Family Support Division issued a child support order? (Check one of the two boxes)

☐ Yes ☐ No

List the judicial case number(s). \_\_\_\_\_

49. Do any of the children listed in this *Petition* currently receive Temporary Assistance for Needy Families (TANF) benefits through the Family Support Division, or have they received TANF benefits in the past? (Check one of the two boxes)

☐ Yes ☐ No

If yes, you must serve the Family Support Division with a copy of *Mother's Petition for Declaration of Paternity, Custody and Support* and other forms filed with this *Petition*. Instructions on how to serve the Family Support Division are listed on page 12 of this *Petition*.

## Request for Relief

I am requesting that \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

be declared the father of the child(ren) listed in question 1 of this *Petition* and that any other persons listed in questions 3 through 5 of this *Petition* be excluded as the father of the children.

I also want the court to do the following: (Check all that apply)

- ☐ Child Custody should be as set forth in Part A of the attached *Parenting Plan* marked Exhibit \_\_\_\_\_. The custody arrangement that is in the best interests of the minor children is set forth in Part A of the attached *Parenting Plan* marked Exhibit \_\_\_\_\_.  
☐ Child Support should be as set forth in Part B of the attached *Parenting Plan* marked Exhibit \_\_\_\_\_.  
☐ I want to change the child(ren)'s names as follows:

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

- ☐ Other (Please state the other request(s))

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

**Directions for Service on Respondent 1** (Enter the name of Respondent 1 on the lines below)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**You must fill out Directions for Service on each person listed in response to question 6 of this Petition.**

**Check one of the following service options:**

- ☐ Respondent 1 has signed a verified *Answer to Petition for Declaration of Paternity, Custody and Support*, which is being filed with the *Mother's Petition for Declaration of Paternity, Custody and Support*. Therefore, do not issue a summons.

If you check this box, you must file the *Answer to Petition for Declaration of Paternity, Custody and Support* at the same time you file this *Petition*. The *Answer* must be signed by Respondent 1 in front of a notary public.

- ☐ Respondent 1 should be served with a summons at their home:

Respondent 1 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 1 served, you must file another copy of all your documents in this case to be served on Respondent 1.**

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 1 should be served with a summons at their place of employment:

Respondent 1 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 1 served, you must file another copy of all your documents in this case to be served on Respondent 1.**

\_\_\_\_\_  
(Employer's Name) (Hours of Employment)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 1 cannot be served in Missouri. Therefore, service by registered mail is requested. A copy of the *Affidavit for Service by Mail* is attached to this form. See Missouri Supreme Court Rule 54.12(b).

**If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.**

**Directions for Service on Respondent 2** (Enter the name of Respondent 2 on the lines below)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**You must fill out Directions for Service on each person listed in response to question 6 of this Petition.**

**Check one of the following service options:**

- ☐ Respondent 2 has signed a verified *Answer to Petition for Declaration of Paternity, Custody and Support*, which is being filed with the *Mother's Petition for Declaration of Paternity, Custody and Support*. Therefore, do not issue a summons.

If you check this box, you must file the *Answer to Petition for Declaration of Paternity, Custody and Support* at the same time you file this *Petition*. The *Answer* must be signed by Respondent 2 in front of a notary public.

- ☐ Respondent 2 should be served with a summons at their home:

Respondent 2 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 2 served, you must file another copy of all your documents in this case to be served on Respondent 2.**

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 2 should be served with a summons at their place of employment:

Respondent 2 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 2 served, you must file another copy of all your documents in this case to be served on Respondent 2.**

\_\_\_\_\_  
(Employer's Name) (Hours of Employment)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 2 cannot be served in Missouri. Therefore, service by registered mail is requested. A copy of the *Affidavit for Service by Mail* is attached to this form. See Missouri Supreme Court Rule 54.12(b).

**If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.**

**Directions for Service on Respondent 3** (Enter the name of Respondent 3 on the lines below)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**You must fill out Directions for Service on each person listed in response to question 6 of this Petition.**

**Check one of the following service options:**

- ☐ Respondent 3 has signed a verified *Answer to Petition for Declaration of Paternity, Custody and Support*, which is being filed with the *Mother's Petition for Declaration of Paternity, Custody and Support*. Therefore, do not issue a summons.

If you check this box, you must file the *Answer to Petition for Declaration of Paternity, Custody and Support* at the same time you file this *Petition*. The *Answer* must be signed by Respondent 3 in front of a notary public.

- ☐ Respondent 3 should be served with a summons at their home:

Respondent 3 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 3 served, you must file another copy of all your documents in this case to be served on Respondent 3.**

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 3 should be served with a summons at their place of employment:

Respondent 3 must be served within 30 days of the issuance of the summons. **If you are going to have Respondent 3 served, you must file another copy of all your documents in this case to be served on Respondent 3.**

\_\_\_\_\_  
(Employer's Name) (Hours of Employment)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Respondent 3 cannot be served in Missouri. Therefore, service by registered mail is requested. A copy of the *Affidavit for Service by Mail* is attached to this form. See Missouri Supreme Court Rule 54.12(b).

**If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.**

If any child listed in this *Petition* receives Temporary Assistance for Needy Families (TANF) benefits, you must serve the Family Support Division with a copy of your *Petition* and *Parenting Plan*.

- Director, Family Support Division  
615 Howerton Court  
Jefferson City, Missouri 65102

Your *Mother's Petition for Declaration of Paternity, Custody and Support* is required to be verified in the presence of a notary public.



*(Sign above in the presence of a Notary Public)*
*(Print your name above)*

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ ) SS

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the County and State aforesaid, the day and year first above written.

\_\_\_\_\_, Notary Public  
County, State of Missouri

My commission expires: \_\_\_\_\_

## Attorney Information

This information may be completed by your attorney. Do not enter any information here if you are filing this case without the assistance of an attorney.

☐ I have assisted Petitioner in the preparation of these pleadings, but I am not entering my appearance on behalf of Petitioner.

\_\_\_\_\_  
(Attorney - Sign above)

\_\_\_\_\_  
(Missouri Bar Number)

\_\_\_\_\_  
(Attorney - Print your name above)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip)

(       )

(       )

\_\_\_\_\_  
(Telephone Number with Area Code)

\_\_\_\_\_  
(Fax Number with Area Code)

\_\_\_\_\_  
(E-mail Address - Optional)

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter your full legal name above)

**v.**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

(Enter full legal name of Mother above)

**-and-**

The MINOR CHILD(REN) as listed  
in question 1 of the *Presumed Father's Petition*  
for Declaration of Non-Paternity,

**Respondents.**

**Case  
Number** \_\_\_\_\_

(Will be assigned when case is filed)

**Division  
Number** \_\_\_\_\_

(Will be assigned when case is filed)

## Presumed Father's Petition for Declaration of Non-Paternity

### The Parties

This *Petition* may only be used by men who are presumed to be the father of a child or children due to marriage to the mother. **This *Petition* may not be used by men wanting to set aside an order of paternity or to remove their name from a birth certificate after signing an acknowledgment of paternity.** Throughout this *Petition*, you will be referred to as Petitioner.

The mother and the minor child(ren) are all Respondents to your *Petition*. The court will appoint a Guardian ad Litem to represent the child(ren) in this action. The Guardian ad Litem may be an independent attorney hired to represent the interests of children in legal proceedings. The court may order you and/or Mother to pay the Guardian ad Litem for their time and expenses in representing the child(ren).

1. I ask the court to find I am **not** the father of the following child(ren):

a. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

b. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

c. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

d. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

e. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

f. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

2. The name of the mother of the minor child(ren) is

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

She will be referred to as Respondent.

3. The mother and I were married on \_\_\_\_/\_\_\_\_/\_\_\_\_ .  
(Date - mm/dd/yyyy)

4. Check all that apply.

- ☐ The mother and I were married within 300 days of the birth of the child(ren) listed above.
- ☐ The mother and I were married at the time of the birth of the child(ren).



## Information about Petitioner

(Enter your name on the lines)

(First Name)

(Middle Name)

(Last Name)

(Jr./Sr./III)

### 5. What is your mailing address?

This is the address the court will use to send information about your case to you. If you move during the time this case is pending, you must send a letter to the court notifying it of your new address. This address is not necessarily the same as the address at which you live. Even if you do not wish to give the address at which you live, you **must** still give the court a mailing address. Because court actions are a matter of public record, the address you list will be available to the public.

(Street)

(City)

(State)

(Zip)

( )

(Telephone Number with Area Code)

(E-mail Address - Optional)

### 6. What are the last four numbers of your social security number?

XXX-XX- \_\_\_\_\_

### 7. Are you over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

### 8. I live in ☐ the United States ☐ another country, which is \_\_\_\_\_.

### 9. I live in ☐ Missouri ☐ another state, which is \_\_\_\_\_.

### 10. I live in the county of \_\_\_\_\_.

City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank.

### 11. What is your current employment status? (Check one of the three boxes)

☐ Employed ☐ Unemployed ☐ Self-employed

### 12. If you are employed or self-employed, where do you currently work?

If you are self-employed, enter a brief description of the type of work you perform such as "Landscaping" or "Day care" on the line for the name of your employer. If you are self-employed, you should also enter the address information for your self-employment.

(Employer's name or type of self-employment)

(Street)

(City)

(State)

(Zip)

## Information about Mother

Provide information for Mother as listed in response to question 2 of this *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
(Enter the full legal name of Mother on the lines above)

### 13. What is Mother's mailing address?

This is the address that the court will use to send information about your case to Mother. If you do not know Mother's current address, you should enter Mother's last known address.

\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip)  
( )  
\_\_\_\_\_  
(Telephone Number with Area Code) (E-mail Address - Optional)

### 14. What are the last four numbers of Mother's social security number?

Do not leave this field blank. If you do not know Mother's social security number, enter "Unknown" in this field.

XXX-XX- \_\_\_\_\_

### 15. Is Mother over the age of eighteen? (Check one of the two boxes)

☐ Yes ☐ No

### 16. Mother lives in ☐ the United States ☐ another country, which is \_\_\_\_\_.

### 17. Mother lives in ☐ Missouri ☐ another state, which is \_\_\_\_\_.

### 18. Mother lives in the county of \_\_\_\_\_.

City of Saint Louis is considered a county. If Mother lives in the city of Saint Louis, you should write "Saint Louis city" in the blank.

### 19. Mother is currently ☐ employed ☐ unemployed ☐ self-employed ☐ employment unknown. (Check one of the four boxes)

### 20. If Mother is employed or self-employed, where does she currently work?

If Mother is self-employed, enter a brief description of the type of work she performs, such as "Landscaping" or "Day care," on the line for the name of the employer. If Mother is self-employed you should also enter the address information for her self-employment.

\_\_\_\_\_  
(Employer's name or type of self-employment)  
\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip)

### 21. Mother ☐ is ☐ is **not** on active duty in the military. (Check "is" or "is not")

If Mother is on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may prevent you from getting a judgment without her consent. You should contact a lawyer about this situation prior to filing this *Petition*.

## Information about the Children

22. List the name of the parent or guardian with whom the children have lived and the address where said children have lived during the past five years. Enter the dates at each address. If the child(ren) have lived at more than three addresses in the past five years, attach an additional page to this *Petition* listing the information requested in question 22 for each additional address.

(1) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) (Dates)

(2) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) (Dates)

(3) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) (Dates)

23. Do you know of anyone other than you or the other parent who has physical custody of any of the children or claims to have custody or visitation rights with respect to any of the children? *(Check one of the two boxes)*

☐ Yes ☐ No

24. Do you have information about any other custody proceeding concerning any of the children pending in a court of this or any other state? *(Check one of the two boxes)*

☐ Yes ☐ No

25. Have you participated in other litigation concerning the custody of any of the children in this or any other state? *(Check one of the two boxes)*

☐ Yes ☐ No

26. Have any of the children been a victim of abuse or neglect? *(Check one of the two boxes)*

☐ Yes ☐ No

27. If you answered "Yes" to questions 23, 24, 25 or 26, please explain.

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28. Has the Family Support Division opened a child support case for any child(ren) listed in this *Petition*? (Check one of the two boxes)

☐ Yes ☐ No

If yes, list the eight digit IV-D number(s). \_\_\_\_\_

If yes, has the Family Support Division issued a child support order? (Check one of the two boxes)

☐ Yes ☐ No

List the judicial case number(s). \_\_\_\_\_

29. Do any of the children listed in this *Petition* currently receive Temporary Assistance for Needy Families (TANF) benefits through the Family Support Division, or have they received TANF benefits in the past? (Check one of the two boxes)

☐ Yes ☐ No

If yes, you must serve the Family Support Division with a copy of *Presumed Father's Petition for Declaration of Non-Paternity* and other forms filed with this *Petition*. Instructions on how to serve the Family Support Division are listed on page 7 of this *Petition*.

### Request for Relief

I am requesting to be declared **not** the father of the child(ren) listed in question 1 of this *Petition*.

I also want the court to do the following: (Check if applicable)

☐ Other (Please state the other request(s))

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**Directions for Service on Mother** (Enter the name of Mother on the lines below)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**You must fill out Directions for Service on Mother listed in response to question 2 of this *Petition*.**

**Check one of the following service options:**

- ☐ Mother has signed a verified *Mother's Answer to Presumed Father's Petition for Declaration of Non-Paternity*, which is being filed with the *Presumed Father's Petition for Declaration of Non-Paternity*. Therefore, do not issue a summons.

If you check this box, you must file the *Mother's Answer to Presumed Father's Petition for Declaration of Non-Paternity* at the same time you file this *Petition*. The *Answer* must be signed by Mother in front of a notary public.

- ☐ Mother should be served with a summons at her home:

Mother must be served within 30 days of the issuance of the summons. **If you are going to have Mother served, you must file another copy of all your documents in this case to be served on Mother.**

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Mother should be served with a summons at her place of employment:

Mother must be served within 30 days of the issuance of the summons. **If you are going to have Mother served, you must file another copy of all your documents in this case to be served on Mother.**

\_\_\_\_\_  
(Employer's Name) (Hours of Employment)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- ☐ Mother cannot be served in Missouri. Therefore, service by registered mail is requested. A copy of the *Affidavit for Service by Mail* is attached to this form. See Missouri Supreme Court Rule 54.12(b).

**Service on Family Support Division (if necessary)**

If any child listed in this *Petition* receives Temporary Assistance for Needy Families (TANF) benefits, you must serve the Family Support Division with a copy of your *Petition*.

- ☐ The child(ren) receive TANF benefits through the Family Support Division. The Family Support Division shall be served at the following address:

Director, Family Support Division, 615 Howerton Court, Jefferson City, Missouri 65102

**If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.**

## Sign Below in the Presence of a Notary Public

Your *Presumed Father's Petition for Declaration of Non-Paternity* is required to be verified in the presence of a notary public.

Petitioner, of lawful age, being duly sworn on his or her oath, states that he or she is the Petitioner named above and that the facts stated in the *Presumed Father's Petition for Declaration of Non-Paternity* are true according to his or her best knowledge, information and belief.

▶ \_\_\_\_\_  
(Sign above in the presence of a Notary Public) (Print your name above)

The following information must be completed by a notary public.

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ ) SS

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, to me known to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same as his/her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the County and State aforesaid, the day and year first above written.

\_\_\_\_\_  
\_\_\_\_\_, Notary Public  
\_\_\_\_\_ County, State of Missouri

My commission expires: \_\_\_\_\_

## Attorney Information

This information may be completed by your attorney. Do not enter any information here if you are filing this case without the assistance of an attorney.

☐ I have assisted Petitioner in the preparation of these pleadings, but I am not entering my appearance on behalf of Petitioner.

\_\_\_\_\_  
(Attorney - Sign above) (Missouri Bar Number)

\_\_\_\_\_  
(Attorney - Print your name above)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

( ) ( )  
(Telephone Number with Area Code) (Fax Number with Area Code) (E-mail Address - Optional)

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter full legal name of Petitioner above)

**v.**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

(Enter full legal name of Mother above)

**-and-**

The MINOR CHILD(REN) as listed  
in question 1 of the *Presumed Father's Petition*  
for Declaration of Non-Paternity,

**Respondents.**

**Case  
Number** \_\_\_\_\_

(Use number on Petition)

**Division  
Number** \_\_\_\_\_

(Use number on Petition)

**Mother's Answer to Presumed Father's Petition  
for Declaration of Non-Paternity**

A mother may file this *Answer* in response to a presumed father's petition asking the court to find he is not the father of her child(ren). The court will appoint a Guardian ad Litem to represent the child(ren) in this action. The Guardian ad Litem may be an independent attorney hired to represent the interests of children in legal proceedings. The court may order you and/or the presumed father to pay the Guardian ad Litem for their time and expenses in representing the child(ren).

1. I, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, am the mother of  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

the minor child(ren) listed in question 1 of *Presumed Father's Petition for Declaration of Non-Paternity*.

2. I understand that by voluntarily entering my appearance and filing this pleading, I am subjecting myself to the jurisdiction of this court, and the court may enter such orders and judgments as are authorized by law, including orders for child support, child custody, parenting time/visitation, and attorney's fees.

3. I admit as true **everything** the Petitioner stated in *Presumed Father's Petition for Declaration of Non-Paternity* and incorporate all of those allegations herein **except** the following:

Any statement not specifically denied will be deemed admitted and you may not have the opportunity to disagree with this statement when the case is presented to the court.

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4. My mailing address is:

This is the address the court will use to send information about your case to you. If you move during the time this case is pending, you must send a letter to the court notifying it of your new address. This address is not necessarily the same as the address at which you live. Even if you do not wish to give the address at which you live, you **must** still give the court a mailing address. Because court actions are a matter of public record, the address you list will be available to the public.

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(Street)

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(City) (State) (Zip)

( )

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(Telephone Number with Area Code) (E-mail Address - Optional)

5. The last four numbers of my social security number are XXX-XX- \_\_\_\_\_ .

6. *Check one of the three boxes.*

- ☐ I am not on active duty in the armed services of the United States of America.
- ☐ I am on active duty in the armed services of the United States of America, but waive my rights pursuant to the Servicemembers Civil Relief Act of 2003.
- ☐ I am on active duty in the armed services of the United States of America and I do **not** waive my rights pursuant to the Servicemembers Civil Relief Act of 2003.

7. List the name of the parent or guardian with whom the children have lived and the address where said children have lived during the past five years. Enter the dates at each address. If the child(ren) have lived at more than three addresses in the past five years, attach an additional page to this *Answer* listing the information requested in question 7 for each additional address.

(1) \_\_\_\_\_

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

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(Street)

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(City) (State) (Zip) (Dates)



(2) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip) (Dates)

(3) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip) (Dates)

8. Do you know of anyone other than you or the other parent who has physical custody of any of the children or claims to have custody or visitation rights with respect to any of the children? *(Check one of the two boxes)*  
☐ Yes ☐ No
9. Do you have information about any other custody proceeding concerning any of the children pending in a court of this or any other state? *(Check one of the two boxes)*  
☐ Yes ☐ No
10. Have you participated in other litigation concerning the custody of any of the children in this or any other state? *(Check one of the two boxes)*  
☐ Yes ☐ No
11. Have any of the children been a victim of abuse or neglect? *(Check one of the two boxes)*  
☐ Yes ☐ No
12. If you answered "Yes" to questions 8, 9, 10 or 11 please explain.

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13. Has the Family Support Division opened a child support case for any child(ren) listed in *Presumed Father's Petition for Declaration of Non-Paternity*? *(Check one of the two boxes)*  
☐ Yes ☐ No  
If yes, list the eight digit IV-D number(s). \_\_\_\_\_  
If yes, has the Family Support Division issued a child support order? *(Check one of the two boxes)*  
☐ Yes ☐ No  
List the judicial case number(s). \_\_\_\_\_

14. Do any of the children listed in *Presumed Father's Petition for Declaration of Non-Paternity* currently receive Temporary Assistance for Needy Families (TANF) benefits through the Family Support Division, or have they received TANF benefits in the past? (Check one of the two boxes)
- ☐ Yes ☐ No

### Request for Relief

I want the court to find that Petitioner ☐ is ☐ is **not** the father of the child(ren) listed in question 1 of *Presumed Father's Petition for Declaration of Non-Paternity*. (Check "is" or "is not")

I also want the court to do the following: (Check if applicable)

☐ Other (Please state the other request(s))

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### Proof of Service on Other Parties

You **must** send (serve) a copy of this document to each of the other parties, or their attorney(s). To obtain service, you may deliver the document by hand; send it by First Class U.S. mail, e-mail or facsimile (fax); or leave it at the office of the party's attorney to be served with a clerk, receptionist or an attorney associated with the attorney to be served.

I certify, under oath that on \_\_\_\_\_ (date) I have sent/given a copy of this *Mother's Answer to Presumed Father's Petition of Non-Paternity* to each of the following parties at the address shown:

Name	Address: U.S. mail/e-mail/fax number

### Notice

Some local rules may also require that you file a *Statement of Income and Expenses (For use in Presumed Father's Non-Paternity Action)* at the time you file this document. Failure to do so could cause your *Mother's Answer to Presumed Father's Petition for Declaration of Non-Paternity* to be stricken.

## Sign Below in the Presence of a Notary Public

Respondent, of lawful age, being duly sworn on his or her oath, states that he or she is the Respondent named above and that the facts stated in *Mother's Answer to Presumed Father's Petition for Declaration of Non-Paternity* are true according to his or her best knowledge, information and belief.

▶ \_\_\_\_\_  
(Sign above in the presence of a Notary Public) (Print your name above)

The following information must be completed by a notary public.

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ ) SS

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, to me known to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same as his/her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the County and State aforesaid, the day and year first above written.

\_\_\_\_\_  
\_\_\_\_\_, Notary Public  
\_\_\_\_\_ County, State of Missouri

My commission expires: \_\_\_\_\_

## Attorney Information

This information may be completed by your attorney. Do not enter any information here if you are filing this case without the assistance of an attorney.

☐ I have assisted Respondent in the preparation of these pleadings, but I am not entering my appearance on behalf of Respondent.

\_\_\_\_\_  
(Attorney - Sign above) (Missouri Bar Number)

\_\_\_\_\_  
(Attorney - Print your name above)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

( ) ( )  
(Telephone Number with Area Code) (Fax Number with Area Code) (E-mail Address - Optional)

**IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI**

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter full legal name of Petitioner above)

**-and-**

The MINOR CHILD(REN) as listed  
in question 1 of the *Petition for Declaration  
of Paternity, Custody and Support*,  
By Next Friend,

**v.**

Respondents shall be listed in the order used in question 6 of the *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 1**, (Enter full legal name of Respondent 1 above)

**-and-**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 2**, (Enter full legal name of Respondent 2 above)

**-and-**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 3**. (Enter full legal name of Respondent 3 above)

**Case  
Number** \_\_\_\_\_

(Use number on Petition)

**Division  
Number** \_\_\_\_\_

(Use number on Petition)

**Answer to Petition for Declaration of Paternity, Custody and Support**

This form may be used by a Respondent answering the *Petition for Declaration of Paternity, Custody and Support*.

1. My name is \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

2. I understand that by voluntarily entering my appearance and filing this pleading, I am subjecting myself to the jurisdiction of this court, and the court may enter such orders and judgments as are authorized by law, including orders for child support, child custody, parenting time/visitation, and attorney's fees.

3. I admit as true **everything** the Petitioner stated in *Petition for Declaration of Paternity, Custody and Support* and incorporate all of those allegations herein **except** the following:

Any statement not specifically denied will be deemed admitted and you may not have the opportunity to disagree with this statement when the case is presented to the court.

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4. Check one of the two boxes.

- ☐ I agree with the *Parenting Plan* filed by the Petitioner.
- ☐ I do **not** agree with the *Parenting Plan* filed by the Petitioner and will file a separate *Parenting Plan*.

5. My mailing address is:

This is the address the court will use to send information about your case to you. If you move during the time this case is pending, you must send a letter to the court notifying it of your new address. This address is not necessarily the same as the address at which you live. Even if you do not wish to give the address at which you live, you **must** still give the court a mailing address. Because court actions are a matter of public record, the address you list will be available to the public.

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(Street)

---

(City) (State) (Zip)

( )

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(Telephone Number with Area Code) (E-mail Address - Optional)

6. The last four numbers of my social security number are XXX-XX- \_\_\_\_\_ .

7. Check one of the three boxes.

- ☐ I am not on active duty in the armed services of the United States of America.
- ☐ I am on active duty in the armed services of the United States of America, but waive my rights pursuant to the Servicemembers Civil Relief Act of 2003.
- ☐ I am on active duty in the armed services of the United States of America and I do **not** waive my rights pursuant to the Servicemembers Civil Relief Act of 2003.

8. List the name of the parent or guardian with whom the children have lived and the address where said children have lived during the past five years. Enter the dates at each address. If the child(ren) have lived at more than three addresses in the past five years, attach an additional page to this *Answer* listing the information requested in question 8 for each additional address.

(1) \_\_\_\_\_ (First Name) (Middle Name) (Last Name) (Jr./Sr./III)

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(Street)

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(City) (State) (Zip) (Dates)

(2) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip) (Dates)

(3) \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
\_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip) (Dates)

9. Do you know of anyone other than you or the other parent who has physical custody of any of the children or claims to have custody or visitation rights with respect to any of the children? (Check one of the two boxes)

☐ Yes ☐ No

10. Do you have information about any other custody proceeding concerning any of the children pending in a court of this or any other state? (Check one of the two boxes)

☐ Yes ☐ No

11. Have you participated in other litigation concerning the custody of any of the children in this or any other state? (Check one of the two boxes)

☐ Yes ☐ No

12. Have any of the children been a victim of abuse or neglect? (Check one of the two boxes)

☐ Yes ☐ No

13. If you answered "Yes" to questions 9, 10, 11 or 12, please explain.

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14. Has the Family Support Division opened a child support case for any child(ren) listed in the *Petition*? (Check one of the two boxes)

☐ Yes ☐ No

If yes, list the eight digit IV-D number(s). \_\_\_\_\_

If yes, has the Family Support Division issued a child support order? (Check one of the two boxes)

☐ Yes ☐ No

List the judicial case number(s). \_\_\_\_\_

15. Do any of the children listed in the *Petition* currently receive Temporary Assistance for Needy Families (TANF) benefits through the Family Support Division, or have they received TANF benefits in the past? (Check one of the two boxes)

☐ Yes ☐ No

## Request for Relief

I want the court to do the following: *(Check all that apply)*

- ☐ Find that \_\_\_\_\_ is the father of  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
the minor child(ren).
- ☐ Grant custody of the minor child(ren) as requested in question 4.
- ☐ Child support should be as set forth in Part B of the attached *Parenting Plan* marked Exhibit \_\_\_\_ .
- ☐ Enter appropriate orders with respect to the support of the minor child(ren).
- ☐ Other (Please state the other request(s))

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## Proof of Service on Other Parties

You **must** send (serve) a copy of this document to each of the other parties, or their attorney(s). To obtain service, you may deliver the document by hand; send it by First Class U.S. mail, e-mail or facsimile (fax); or leave it at the office of the party's attorney to be served with a clerk, receptionist or an attorney associated with the attorney to be served.

I certify, under oath that on \_\_\_\_\_ (date) I have sent/given a copy of this *Answer to Petition for Declaration of Paternity, Custody and Support* to each of the following parties at the address shown:

Name	Address: U.S. mail/e-mail/fax number

### Notice

Some local rules may also require that you file a *Statement of Income and Expenses (For use in Paternity Action)* at the time you file this document. Failure to do so could cause your *Answer to Petition for Declaration of Paternity, Custody and Support* to be stricken. Also, if there are any unemancipated children, you are required to file a proposed *Parenting Plan* within 30 days after the date you were served or the date you filed this *Answer to Petition for Declaration of Paternity, Custody and Support*. You may file a joint *Parenting Plan* with the other parent.

## Sign Below in the Presence of a Notary Public

Respondent, of lawful age, being duly sworn on his or her oath, states that he or she is the Respondent named above and that the facts stated in the *Answer to Petition for Declaration of Paternity, Custody and Support* are true according to his or her best knowledge, information and belief.

► \_\_\_\_\_  
(Sign above in the presence of a Notary Public) (Print your name above)

The following information must be completed by a notary public.

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ ) SS

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, to me known to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same as his/her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the County and State aforesaid, the day and year first above written.

\_\_\_\_\_  
\_\_\_\_\_, Notary Public  
\_\_\_\_\_ County, State of Missouri

My commission expires: \_\_\_\_\_

## Attorney Information

This information may be completed by your attorney. Do not enter any information here if you are filing this case without the assistance of an attorney.

☐ I have assisted Respondent in the preparation of these pleadings, but I am not entering my appearance on behalf of Respondent.

\_\_\_\_\_  
(Attorney - Sign above) (Missouri Bar Number)

\_\_\_\_\_  
(Attorney - Print your name above)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

( ) ( )  
(Telephone Number with Area Code) (Fax Number with Area Code) (E-mail Address - Optional)



## Not Approved for use in Contested Cases

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter your full legal name above)

-and-

The MINOR CHILD(REN) as listed  
in question 1 of the *Petition for Declaration  
of Paternity, Custody and Support*,  
By Next Friend,

v.

Respondents shall be listed in the order used in question 6 of the *Petition*.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 1**, (Enter full legal name of Respondent 1 above)

-and-

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 2**, (Enter full legal name of Respondent 2 above)

-and-

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 3**. (Enter full legal name of Respondent 3 above)

**Case**

**Number** \_\_\_\_\_

(Will be assigned when case is filed)

**Division**

**Number** \_\_\_\_\_

(Will be assigned when case is filed)

### Judgment of Paternity

1. As used herein, "Mother" refers to \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

and "Father" refers to \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

2. Appearances (Check all that apply)

☐ The following Respondents fail to appear and remain in default as to the pleadings:

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

- ☐ Mother appears in person.  
☐ Mother appears by attorney.  
☐ Guardian ad Litem appears in person.  
☐ Third Party \_\_\_\_\_ appears in person.  

(First Name)
(Middle Name)
(Last Name)
(Jr./Sr./III)

☐ Father appears in person.  
☐ Father appears by attorney.

☐ Third Party \_\_\_\_\_ appears by attorney.  

(First Name)
(Middle Name)
(Last Name)
(Jr./Sr./III)

☐ Additional appearances:  

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

(First Name)
(Middle Name)
(Last Name)
(Jr./Sr./III)

3. The last four numbers of Mother's social security number are \_\_\_\_\_ and the last four numbers of Father's social security number are \_\_\_\_\_ .

4. Check one of the two boxes.

- ☐ Respondent(s) is/are not on active duty in the armed services of the United States now or any time since the filing of the petition herein.
- ☐ Respondent \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
- is on active duty in the armed services of the United States, but has waived his or her rights pursuant to the Servicemembers Civil Relief Act of 2003.

## Children

5. This judgment pertains to the following child(ren) hereinafter referred to as “minor child(ren):”

- |    |              |               |             |               |               |
|----|--------------|---------------|-------------|---------------|---------------|
| a. | _____        | _____         | _____       | _____         | _____         |
|    | (First Name) | (Middle Name) | (Last Name) | (Jr./Sr./III) | (Child's Age) |
| b. | _____        | _____         | _____       | _____         | _____         |
|    | (First Name) | (Middle Name) | (Last Name) | (Jr./Sr./III) | (Child's Age) |
| c. | _____        | _____         | _____       | _____         | _____         |
|    | (First Name) | (Middle Name) | (Last Name) | (Jr./Sr./III) | (Child's Age) |
| d. | _____        | _____         | _____       | _____         | _____         |
|    | (First Name) | (Middle Name) | (Last Name) | (Jr./Sr./III) | (Child's Age) |
| e. | _____        | _____         | _____       | _____         | _____         |
|    | (First Name) | (Middle Name) | (Last Name) | (Jr./Sr./III) | (Child's Age) |
| f. | _____        | _____         | _____       | _____         | _____         |
|    | (First Name) | (Middle Name) | (Last Name) | (Jr./Sr./III) | (Child's Age) |

## Paternity

6. Check all that apply.

- ☐ The court finds that there is/are no previous legal finding(s) of paternity for the minor child(ren).

A legal finding of paternity may be a court judgment or an acknowledgment of paternity, which is an affidavit signed by the parents to get the father's name on a child's birth certificate. Genetic (DNA) testing or an administrative child support order done by the Family Support Division are **not** legal findings of paternity.

- ☐ The court finds that \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

is the father of the minor child(ren).

- ☐ The court finds that \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

is **not** the father of the minor child(ren).

- ☐ Other \_\_\_\_\_

## Child Custody

7. Check one of the two boxes.

- ☐ The court does **not** have "jurisdiction" (as defined in the Uniform Child Custody Jurisdiction and Enforcement Act, §452.700, RSMo, et seq.) over the custody arrangements of the minor child(ren) and therefore enters no further orders with respect to the custodial arrangements of the minor child(ren).
- ☐ The court has "jurisdiction" (as defined in the Uniform Child Custody Jurisdiction and Enforcement Act, §452.700, RSMo, et seq.) over the custody arrangements of the minor child(ren).

The court approves the provisions of Part A of the *Parenting Plan* marked Exhibit \_\_\_\_\_ pertaining to the custodial arrangements of the minor child(ren) and finds that the custodial arrangements contained in said *Parenting Plan* are in the best interests of the minor child(ren).

Therefore, the court orders the provisions of Part A of said *Parenting Plan* pertaining to the custodial arrangements of the minor child(ren) and incorporates by reference all of the terms and conditions pertaining to the custodial arrangements of the minor child(ren) set forth in Part A of said *Parenting Plan* as if fully set forth herein.

The sheriff or other law enforcement officers shall enforce the rights of any person to custody or visitation pursuant to §452.425, RSMo.

In the event of noncompliance with this order, the aggrieved party may file a verified motion for contempt. If custody, visitation, or third-party custody is denied or interfered with by a parent or third party without good cause, the aggrieved person may file a family access motion with the court stating the specific facts that constitute a violation of the custody provisions of the judgment of dissolution, legal separation, or judgment of paternity. The circuit clerk will provide the aggrieved party with an explanation of the procedures for filing a family access motion and a simple form for use in filing the family access motion. A family access motion does not require the assistance of legal counsel to prepare and file.

## Child Support

8. Check one of the two boxes.

- ☐ The court does not have jurisdiction to enter any orders with respect to the support of the minor child(ren).
- ☐ The court orders the provisions of Part B of the *Parenting Plan* marked Exhibit \_\_\_\_\_, pertaining to the support of the minor child(ren) and incorporates by reference all of the terms and conditions set forth in Part B of said *Parenting Plan* as if fully set forth herein.

9. Check if applicable.

- ☐ The State of Missouri has provided public assistance under the TANF program for the minor child(ren) herein. The total amount due as authorized by law and the guidelines is \_\_\_\_\_ and judgment is entered against

\_\_\_\_\_ and in favor of  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
the State of Missouri for said amount.

## Guardian Ad Litem Fees

10. Check all that apply.

- ☐ Mother shall pay to \_\_\_\_\_ the sum of \_\_\_\_\_ as and for Guardian ad Litem fees in addition to the sum of \_\_\_\_\_ previously ordered.
- ☐ Father shall pay to \_\_\_\_\_ the sum of \_\_\_\_\_ as and for Guardian ad Litem fees in addition to the sum of \_\_\_\_\_ previously ordered.
- ☐ Guardian ad Litem fees previously ordered to be paid by \_\_\_\_\_ have been satisfied.

## Other Orders

11. Change(s) of Names of the Minor Child(ren)

- a. The name of \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
is changed to \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
- b. The name of \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)  
is changed to \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

is changed to \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

is changed to \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

is changed to \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

is changed to \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

12. *Check all that apply.*

- ☐ Some or all of the children named above were born in the State of Missouri. The Missouri Bureau of Vital Records shall amend the birth record of the minor child(ren) pursuant to §210.841 and §210.849, RSMo, to reflect that Father is the biological father of the minor child(ren) as stated above and to remove any biographical information of any father currently listed on the birth record(s). A certified copy of this judgment shall be sent to the Missouri Bureau of Vital Records.
- ☐ Some or all of the children were not born in the State of Missouri. It is the responsibility of the parties to apply to the applicable state's department of vital records for amendment of the birth certificate(s).

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13. *Check if applicable.*

- ☐ Other orders are as per the attached Exhibit \_\_\_\_\_, which is incorporated by reference as if fully set forth herein.

## Court Costs

14. Check one of the two boxes.

- ☐ Court costs are to be paid from the court cost deposit(s) previously posted.  
☐ Court costs are waived.

## Waiver of Right to Rehearing (If case is heard by a Commissioner pursuant to §487.010, RSMo, et seq.)

We, the undersigned parties, do hereby acknowledge receipt of the findings and recommendations of the commissioner and waive the right to file a motion for rehearing in this case.

- ☐ Signature of Petitioner's Attorney \_\_\_\_\_  
☐ Signature of Respondent's Attorney \_\_\_\_\_  
☐ Signature of Guardian ad Litem \_\_\_\_\_  
☐ Signature of Petitioner \_\_\_\_\_  
☐ Signature of Respondent \_\_\_\_\_  
☐ Signature of Third Party/Respondent \_\_\_\_\_

(If heard by a Family Court Judge)

\_\_\_\_\_  
(Judge)

\_\_\_\_\_  
(Date)

(If heard by a Family Court Commissioner)

Findings and Recommendations of Commissioner:

\_\_\_\_\_  
(Commissioner)

\_\_\_\_\_  
(Date)

All orders and these findings and recommendations of the Commissioner are confirmed and adopted as the judgment of the court.

\_\_\_\_\_  
(Judge)

\_\_\_\_\_  
(Date)

A certified copy of this judgment is to be mailed to the following person(s): (Check all applicable boxes)

☐ \_\_\_\_\_  
(Print Name of Petitioner's Attorney)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip)

( )

\_\_\_\_\_  
(Telephone Number with Area Code)

☐ \_\_\_\_\_  
(Print Name of Respondent's Attorney)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip)

( )

\_\_\_\_\_  
(Telephone Number with Area Code)

☐ \_\_\_\_\_  
(Print Name of Guardian ad Litem)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip)

( )

\_\_\_\_\_  
(Telephone Number with Area Code)

☐ \_\_\_\_\_  
(Print Name of Petitioner)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip)

( )

\_\_\_\_\_  
(Telephone Number with Area Code)

☐ \_\_\_\_\_  
(Print Name of Respondent)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip)

( )

\_\_\_\_\_  
(Telephone Number with Area Code)

☐ \_\_\_\_\_  
(Print Name of Third Party/Respondent)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip)

( )

\_\_\_\_\_  
(Telephone Number with Area Code)

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter your full legal name above)

**v.**

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

(Enter full legal name of Mother above)

**-and-**

The MINOR CHILD(REN) as listed  
in question 1 of the *Presumed Father's Petition*  
for Declaration of Non-Paternity,

**Respondents.**

**Case  
Number** \_\_\_\_\_

(Will be assigned when case is filed)

**Division  
Number** \_\_\_\_\_

(Will be assigned when case is filed)

## Judgment of Non-Paternity

1. *Appearances (Check all that apply)*

☐ Mother remains in default as to the pleadings.

☐ Mother appears in person.

☐ Petitioner appears in person.

☐ Mother appears by attorney.

☐ Petitioner appears by attorney.

☐ Guardian ad Litem appears in person.

☐ Third Party \_\_\_\_\_ appears in person.  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

☐ Third Party \_\_\_\_\_ appears by attorney.  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

☐ Additional appearances:

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

2. The last four numbers of Petitioner's social security number are \_\_\_\_\_ and the last four numbers of Mother's social security number are \_\_\_\_\_.

3. *Check one of the two boxes.*

☐ Mother is not on active duty in the armed services of the United States now or any time since the filing of the petition herein.

☐ Mother is on active duty in the armed services of the United States, but has waived her rights pursuant to the Servicemembers Civil Relief Act of 2003.

## Children

4. This judgment pertains to the following child(ren) hereinafter referred to as "minor child(ren):"

- a. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)
- b. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)
- c. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)
- d. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)
- e. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)
- f. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

## Findings and Orders of the Court

5. Check all that apply.

- ☐ The court finds that there is/are no previous legal finding(s) of paternity for the minor child(ren).

A legal finding of paternity may be a court judgment or an acknowledgment of paternity, which is an affidavit signed by the parents to get the father's name on a child's birth certificate. Genetic (DNA) testing or an administrative child support order done by the Family Support Division are **not** legal findings of paternity.

- ☐ The court finds Petitioner is the presumed legal father of the minor child(ren).
- ☐ The court finds by clear and convincing evidence that Petitioner is **not** the father of the minor child(ren).
- ☐ Genetic testing of the parties, completed in the standards of §210.834, RSMo, shows that Petitioner is excluded as the father of the minor child(ren) with a probability of 98% or higher.
- ☐ Another man has filed an *Affidavit Acknowledging Paternity* of the minor child(ren).
- ☐ Some or all of the children named above were born in the State of Missouri. The Missouri Bureau of Vital Records shall amend the birth record of the minor child(ren) pursuant to §210.841 and §210.849, RSMo, to reflect that Father is the biological father of the minor child(ren) as stated above and to remove any biographical information of any father currently listed on the birth record(s). A certified copy of this judgment shall be sent to the Missouri Bureau of Vital Records.
- ☐ Some or all of the children were not born in the State of Missouri. It is the responsibility of the parties to apply to the applicable state's department of vital records for amendment of the birth certificate(s).
- ☐ Other \_\_\_\_\_
- ☐ Other orders are as per the attached Exhibit \_\_\_\_\_, which is incorporated by reference as if fully set forth herein.



## Guardian Ad Litem Fees

6. Check all that apply.

- ☐ Mother shall pay to \_\_\_\_\_ the sum of \_\_\_\_\_ as and for Guardian ad Litem fees in addition to the sum of \_\_\_\_\_ previously ordered.
- ☐ Petitioner shall pay to \_\_\_\_\_ the sum of \_\_\_\_\_ as and for Guardian ad Litem fees in addition to the sum of \_\_\_\_\_ previously ordered.
- ☐ Guardian ad Litem fees previously ordered to be paid by \_\_\_\_\_ have been satisfied.

## Court Costs

7. Check one of the two boxes.

- ☐ Court costs are to be paid from the court cost deposit(s) previously posted.
- ☐ Court costs are waived.

## Waiver of Right to Rehearing (If case is heard by a Commissioner pursuant to §487.010, RSMo, et seq.)

We, the undersigned parties, do hereby acknowledge receipt of the findings and recommendations of the commissioner and waive the right to file a motion for rehearing in this case.

- ☐ Signature of Petitioner's Attorney \_\_\_\_\_
- ☐ Signature of Mother's Attorney \_\_\_\_\_
- ☐ Signature of Guardian ad Litem \_\_\_\_\_
- ☐ Signature of Petitioner \_\_\_\_\_
- ☐ Signature of Mother \_\_\_\_\_
- ☐ Signature of Third Party/Respondent \_\_\_\_\_

(If heard by a Family Court Judge)

\_\_\_\_\_  
(Judge)

\_\_\_\_\_  
(Date)

(If heard by a Family Court Commissioner)

Findings and Recommendations of Commissioner:

\_\_\_\_\_  
(Commissioner)

\_\_\_\_\_  
(Date)

All orders and these findings and recommendations of the Commissioner are confirmed and adopted as the judgment of the court.

\_\_\_\_\_  
(Judge)

\_\_\_\_\_  
(Date)

A certified copy of this judgment is to be mailed to the following person(s): (Check all applicable boxes)

☐ \_\_\_\_\_  
(Print Name of Petitioner's Attorney)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(Telephone Number with Area Code)

☐ \_\_\_\_\_  
(Print Name of Mother's Attorney)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(Telephone Number with Area Code)

☐ \_\_\_\_\_  
(Print Name of Guardian ad Litem)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(Telephone Number with Area Code)

☐ \_\_\_\_\_  
*(Print Name of Petitioner)*  
\_\_\_\_\_  
*(Street)*  
\_\_\_\_\_  
*(City, State, Zip)*  
*( )*  
\_\_\_\_\_  
*(Telephone Number with Area Code)*

☐ \_\_\_\_\_  
*(Print Name of Mother)*  
\_\_\_\_\_  
*(Street)*  
\_\_\_\_\_  
*(City, State, Zip)*  
*( )*  
\_\_\_\_\_  
*(Telephone Number with Area Code)*

☐ \_\_\_\_\_  
*(Print Name of Third Party/Respondent)*  
\_\_\_\_\_  
*(Street)*  
\_\_\_\_\_  
*(City, State, Zip)*  
*( )*  
\_\_\_\_\_  
*(Telephone Number with Area Code)*

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Petitioner**, (Enter your full legal name above)

v.

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 1**, (Enter full legal name of Respondent 1 above)

-and-

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 2**, (Enter full legal name of Respondent 2 above)

-and-

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

**Respondent 3**. (Enter full legal name of Respondent 3 above)

**Case**

**Number** \_\_\_\_\_

(Will be assigned when case is filed)

**Division**

**Number** \_\_\_\_\_

(Will be assigned when case is filed)

**Petition, Consent and Order for Appointment as Next Friend  
in Paternity Action**

You are bringing this action on behalf of yourself and your child(ren). An adult must be appointed to represent their interests because they cannot file a case on their own. The court calls that person a "Next Friend."

1. I request that the court appoint (Check one of the two boxes)

☐ Me

☐ Someone else (Enter name below)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

as Next Friend for the following minor child(ren):

a. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

b. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

c. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

d. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

e. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

f. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child's Age)

2. Check one of the three boxes.

- ☐ The Next Friend is the mother of the child(ren).  
☐ The Next Friend is the father of the child(ren).  
☐ The Next Friend is not a parent of the child(ren), but currently has legal or physical custody of the child(ren).

3. Next Friend's mailing address is:

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

( )  
(Telephone Number with Area Code) (E-mail Address - Optional)

4. Check one of the two boxes.

- ☐ The child(ren) reside(s) with the Next Friend  
☐ The child(ren) reside(s) with the following person at the following address:

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

( )  
(Telephone Number with Area Code) (E-mail Address - Optional)

I consent to serving as Next Friend in this matter.

► \_\_\_\_\_ / /  
(Next Friend sign above) (Print Next Friend's name above) (Date - mm/dd/yyyy)

## Consent of Children over the Age of Fourteen

Under Missouri law, children age 14 or older must consent to the appointment of a Next Friend.

I, being age 14 or older, consent to the appointment of (Enter the name of Next Friend below)

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

as my Next Friend in this case.

▶ \_\_\_\_\_  
(Child sign above, if age 14 or older) (Print Child's name above) (Date - mm/dd/yyyy)

▶ \_\_\_\_\_  
(Child sign above, if age 14 or older) (Print Child's name above) (Date - mm/dd/yyyy)

▶ \_\_\_\_\_  
(Child sign above, if age 14 or older) (Print Child's name above) (Date - mm/dd/yyyy)

## Attorney Information

This information may be completed by your attorney. Do not enter any information here if you are filing this case without the assistance of an attorney.

☐ I have assisted the Petitioner listed above in preparation of these pleadings, but I am not entering my appearance on behalf of the Petitioner listed above.

\_\_\_\_\_  
(Attorney - Sign above) (Missouri Bar Number)

\_\_\_\_\_  
(Attorney - Print your name above)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

\_\_\_\_\_  
(Telephone Number with Area Code) (Fax Number with Area Code) (E-mail Address - Optional)

## ORDER

\_\_\_\_\_  
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

is appointed as Next Friend for the minor child(ren) listed above.

SO ORDERED:

\_\_\_\_\_  
(Judge/Commissioner) (Date)