IN THE CIRCUIT COURT OF

MISSOURI

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



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)

f. (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child" 2. The name of the mother of the minor child(ren) is (Interpretent of the minor child(ren)) (Interpretent of the minor chil			(Middle Name)	(Last Name)	(Jr./Sr./III) (Child's
 (First Name) (Middle Name) (Last Name) (Jr./Sr./III) (Child' 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). 			(Middle Name)	(Last Name)	(Jr./Sr./III) (Child's
(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) (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).			(Middle Name)	(Last Name)	(Jr./Sr./III) (Child's
 She will be referred to as Respondent. The mother and I were married on	2.	The name of the m	other of the minor child(r	en) is	
 3. The mother and I were married on		(First Name)	(Middle Name) (Las	t Name) (Jr./S	r./III)
(Date - mm/dd/yyyy) A. 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).		She will be referred	to as Respondent.		
(Date - mm/dd/yyyy) A. 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).	3.	The mother and I w	vere married on		
 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). 	5.		(Date -	- mm/dd/yyyy)	SVI
 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). 	1	Chook all that and	,		
The mother and I were married at the time of the birth of the child(ren).	4.			n dave of the hirth of th	a child(ran) listed shows
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Info	ormation about Petitione	r			
(Ent	er your name on the lines)	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
5.	What is your mailing addres	ss?			
	This is the address the court will is pending, you must send a lette same as the address at which yo the court a mailing address. Bec the public.	er to the court notifyir ou live. Even if you do	ng it of your new address. In not wish to give the add	This address is not ne ress at which you live,	ecessarily the you must still give
	(Street)				
	(311001)				NO.
	(City)	(State)	(Zip)		
	(Telephone Number with Area Co	de) (E-mail Addre	ss - Optional)	,50	
6.	What are the last four numb XXX-XX-	pers of your socia	I security number?	LPR-L-	
7.	Are you over the age of eigl	hteen? (Check or	ne of the two boxes)	<u> </u>	
8.	I live in the United States				
9.	I live in 🗌 Missouri 🗌 ano	ther state, which	is		
10.	I live in the county of City of Saint Louis is considered blank.			you should write "Sain	t Louis city" in the
	DIANK.	R			
11.	What is your current employ	· _ `		e boxes)	
12.	If you are employed or self-	employed, where	do you currently wo	rk?	
	If you are self-employed, enter a on the line for the name of your e your self-employment.				
	GP				
	(Employer's name or type of self-	employment)			
	(Street)				
	(City)	(State)	(Zip)		
\mathcal{A}	1-27	(0.0.0)	(
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Information about Mother

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

	t Name) (Middle Nam er the full legal name of Mother on the line		Last Name))		(Jr./Sr./III)
13.	What is Mother's mailing address	?			and and a second s
	This is the address that the court will us current address, you should enter Mothe				e to Mother. If you do not know Mother's
	(Street)				AT .
	(City)	(State)	(Zip)	
	(Telephone Number with Area Code)	∃-mail A	ddress - Optior	al)	
14.	What are the last four numbers of Do not leave this field blank. If you do not				
	XXX-XX-			S	
15.	Is Mother over the age of eightee	ר? <i>(Ch</i>	eck one of tl	ne two boxe	es)
16.	Mother lives in the United Stat	es 🗌 a	another cour	try, which i	S
17.	Mother lives in 🗌 Missouri 🗌 ar	other s	state, which	S	
18.	Mother lives in the county of City of Saint Louis is considered a coun the blank.	ty. If Mot	ther lives in the	city of Saint L	ouis, you should write "Saint Louis city" in
19.	Mother is currently employed (Check one of the four boxes)	🗌 un	employed	self-emp	oloyed 🗌 employment unknown.
20.	If Mother is employed or self-emp	loved.	where does	she current	lv work?
	If Mother is self-employed, enter a brief	descript	ion of the type	of work she pe	•
	R				
	(Employer's name or type of self-employed	nent)			
\sim	(Street)				
	(City)	(State	:)	(Zip)	_
21.	Mother is is not on activ	e duty	in the milita	y. (Check '	is" or "is not")
					cemembers Civil Relief Act (SCRA) may a lawyer about this situation prior to filing

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)				0.
(City)	(State)	(Zip)	(Dates)	
2)				7
(First Name)	(Middle Name)	(Last Name)	L.S.	(Jr./Sr./III)
(Street)			R	
(City)	(State)	(Zip)	(Dates)	
3)				
(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
(Street)		K		
(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.

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
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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)

(Firs	Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)	
You	must fill out Direct	tions for Serv	ice on Mother	listed in re	sponse to question	2 of this <i>Petition</i> .
Che	ck one of the follo	wing service	options:			4
	Non-Paternity, whi Paternity. Therefor If you check this box,	ch is being file e, do not issu you must file the	ed with the <i>Pre</i> e a summons. <i>Mother's Answel</i>	esumed Fatl		claration of Non-
				0 1	Mother in front of a nota	ry public.
	Mother should be s					
	Mother must be serve must file another co					ave Mother served, you
					OK.	
	(Street)				19- ¹	
	(City)		(State)	(Zip)		
\square	Mother should be s	served with a	summons at h	er place of (employment:	
	Mother must be serve must file another co					ave Mother served, you
	(Employer's Name)				(Hours	s of Employment)
	(Street)		105			
	(City)		(State)	(Zip)		
					, .	requested. A copy of e 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

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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)	G
The following information must be completed by a	a notary public.	_NO·
STATE OF)		<u> </u>
) SS COUNTY OF)	S	S.
On this day of	_ , to me known to be the person de	escribed in and who
executed the foregoing instrument and acknowled and deed.	dged that he/she executed the same	e as his/her free act
IN WITNESS WHEREOF, I have hereunto set my State aforesaid, the day and year first above write		n the County and
	ALL A	
		. Notarv Public
FOR		ity, State of Missour
My commission expires:		
Attorney Information		
This information may be completed by your attorney. Do no assistance of an attorney.	ot enter any information here if you are filing	this case without the
I have assisted Petitioner in the preparation of on behalf of Petitioner.	of these pleadings, but I am not ente	ring my appearance
(Attorney - Sign above)	(Missouri Bar Number)	
(Attorney - Print your name above)		
(Street)		
(City) (State	e) (Zip)	