Form CAFC211 - Answer to Petition for Child Custody

In what Missouri County is this case to be decided?		In the Circuit Court of		MISSOURI					
What is the case number? (This number is assigned at time of filing)		Case Number		Division Number					
Answer all o	questions on th	is form complete	ely.						
Your Information	1. My full name i	is: (Middle Name)	(Last Name)		(Jr./Sr./III)				
	 2.								
	(Street)		(State)	(Zip)					
	(Telephone Num	nber) (E-	-Mail Address)						
Other Party's Information	5. The full name	of the other party is	<u> </u>						
	(First Name)	(Middle Name)	(Last Name)	((Jr./Sr./III)				
Military Information	I am on a		e United States militated States military, but ief Act of 2003.		ts pursuant to				
Important Information	am subjectir orders and j	ng myself to the juris udgments as are au	entering my appeara sdiction of this court, ithorized by law, inclu g time/visitation, and	, and the court m uding orders awa	ay enter such rding child				

Agree or Disagree with Motion	9.	I admit as true EVERYTHING the other party stated in his or her Petition for Child Custody and incorporate all of those allegations herein EXCEPT the following:						
Supreme Court Rule 43	.01(d)	by: (You MUS7	check at I	east ONE of the	e following four bo	es)	tody pursuant to Missouri the following address:	
(Street)								
(City) Handing a copy to to Sending a copy to to	he oth	er party or his	or her atto	rney by fax to				
(To be used only by party or his or her a	writte attorne	n consent of they at	ne party file	ed with the cou		y via electi	ronic mail to the other (Email Address) on	
Respondent, of lawfu above and that the fa knowledge and belief	cts st						Respondent named ording to his or her best	
SIGN HERE			-/	PRINT YOUF	R NAME HERE			
Subscribed and sworn	o on _			Sign here	in front of		This should only be completed if a lawyer	
Notary Public			-	a Notary F	Public		helped you with this	
My Commission Expires	:						form	
ATTORNEY INFORMAT	ION (To be completed	by your atto	orney)			o not enter any mation here if you are	
Attorney – SIGN HERE				Missouri Bar N	lumber	the a	this pleading without ssistance of a lawyer.	
PRINT YOUR ATTORNI	EY'S NA	ME HERE					mpleted by your	
(Street)							nave assisted the	
(City) (State			(State)	(Zip)			ondent in the aration of these lings, but I am not	
(Telephone Number) (Fax Number) (Email Address)					entering my appearance on his or her behalf.			