

# Form CAFC111 - Answer to Motion to Modify Child Custody

In what Missouri county was the custody judgment entered?

In the Circuit Court of	MISSOURI
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What is the case number of the custody judgment?

Case Number
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Division Number
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*Answer all questions on this form completely.*

## Your Information

1. My current full name is: _____ <i>(First Name)</i> <i>(Middle Name)</i> <i>(Last Name)</i> <i>(Jr./Sr./III)</i>
2. <input type="checkbox"/> I filed the original case. (Petitioner/Plaintiff) <input type="checkbox"/> I did not file the original case. (Respondent/Defendant)
3. <input type="checkbox"/> I am the Mother <input type="checkbox"/> I am the Father
4. My Social Security Number is: _____
5. My mailing address is: _____ <i>(Street)</i> _____ <i>(City)</i> _____ <i>(State)</i> _____ <i>(Zip)</i> _____ <i>(Telephone Number)</i> _____ <i>(E-Mail Address)</i>

## Other Party's Information

6. The current full name of the other party is: _____ <i>(First Name)</i> <i>(Middle Name)</i> <i>(Last Name)</i> <i>(Jr./Sr./III)</i>
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## Military Information

7. <input type="checkbox"/> I am NOT on active duty in the United States military. <input type="checkbox"/> I am on active duty in the United States military, but waive my rights pursuant to the Servicemembers Civil Relief Act of 2003.
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## Important Information

8. 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 awarding child support, child custody, parenting time/visitation, and attorney's fees.
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**Agree or  
Disagree  
with Motion**

9. I admit as true EVERYTHING the other party stated in his or her Motion to Modify Child Custody and incorporate all of those allegations herein EXCEPT the following:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify under oath that I have given the other party a copy of this Answer to Motion to Modify Child Support pursuant to Missouri Supreme Court Rule 43.01(d) by: *(You MUST check at least ONE of the following four boxes)*

- Mailing a copy to the other party or his or her attorney on \_\_\_\_\_ (Date) at the following address:  
 \_\_\_\_\_  
 (Street)  
 \_\_\_\_\_  
 (City) (State) (Zip)
- Handing a copy to the other party or his or her attorney on \_\_\_\_\_ (Date).
- Sending a copy to the other party or his or her attorney by fax to  
 \_\_\_\_\_ (fax number) on \_\_\_\_\_ (Date) at \_\_\_\_\_ (Time).
- (To be used only by written consent of the party filed with the court)* Sending a copy via electronic mail to the other party or his or her attorney at \_\_\_\_\_ (Email Address) on \_\_\_\_\_ (Date).

Petitioner/Plaintiff  Respondent/Defendant, of lawful age, being duly sworn on his or her oath, states that he or she is the party named above and that the facts stated in this Answer to Motion to Modify Child Support are true according to his or her best knowledge and belief.

▶ \_\_\_\_\_  
 SIGN HERE PRINT YOUR NAME HERE

Subscribed and sworn to on \_\_\_\_\_

Notary Public \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

Sign here in front of a Notary Public

This should only be completed if a lawyer helped you with this form

<p><b>ATTORNEY INFORMATION</b> <i>(To be completed by your attorney)</i></p> <p>_____          Attorney - SIGN HERE Missouri Bar Number</p> <p>_____          PRINT YOUR ATTORNEY'S NAME HERE</p> <p>_____          (Street)</p> <p>_____          (City) (State) (Zip)</p> <p>_____          (Telephone Number) (Fax Number) (Email Address)</p>		<p><i>Do not enter any information here if you are filing this pleading without the assistance of a lawyer. This information should be completed by your attorney.</i></p> <p><input type="checkbox"/> <i>I have assisted the above named party in the preparation of these pleadings, but I am not entering my appearance on his or her behalf.</i></p>
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