

# Affidavit Disclosing Care or Custody Proceedings

Use this packet in every case involving a child,  
even if you are not seeking a custody or support order.

Produced by the Suffolk Probate & Family Court Community Outreach Program—Richard Iannella, Register

## READ THIS:

Information provided in this packet IS NOT LEGAL ADVICE, It is information. This information is not a substitute for a competent lawyer.

When you sign a legal document or file any papers in court, it can seriously affect you in the future. You should always try to get legal advice before filing documents.

Bar Association lawyer referral services are listed in our brochure "Legal Resources in and around Suffolk County." Also listed are free legal service providers. You may be eligible for help.

**INSTRUCTIONS FOR COMPLETING the  
AFFIDAVIT DISCLOSING CARE OR CUSTODY PROCEEDINGS**

Follow the instructions carefully. Print or type all information.

**(Note: This is a two-page, carbonless form. Press hard as you write or type.)**

- A** At the top of the form, put in the name of your case, and the docket number if you know it. (If you don't have a number yet, leave it blank.)
- B** Print YOUR name.
- C** Print the names of children affected by this case. In a guardianship, list the children you wish to be guardian for. In change of name, modification or divorce, list the children of this marriage. In paternity, list all children who's mother and father are both involved in this case.
- D** Check the box if your address was impounded or if you think you or the children would be in danger if another party learned the address! You may check this box if you are in a shelter for battered persons, or if you think there is danger of physical or emotional abuse.  
**If you check the box, DON'T COMPLETE SECTIONS 4 and 5. Complete Sections 10 and 11 on the back of the form. Then, go to Section 6.**
- E** Put in the children's *current* address.
- F** If any child's address changed in the last two years, fill in the other addresses here.
- G** Put in your address.
- H** In this section you must answer these questions: **Do you know of any other court case(s) involving these children? Were you part of any of those cases?** For example, if you want to be the guardian of a child and you know the child's parents had a court case involving the child, but you were *not* a part of it you would do this:  
"I  have  have not participated in and  know  do not know of other care and custody proceedings involving the above-named child(ren) in Massachusetts or in any other state or country"  
**If you know of any cases, complete sections 7 and 8—If not, go to section 9**
- I** Fill this section in only if there are other cases involving these children. Look at Section 2 for the letter next to each child's name. Use the same letter to fill in information about that child. Print the name of the Court (for example, Suffolk Probate Court or Boston Juvenile Court), the Docket Number, the present status of the case, and whether custody was given to you or someone else who is part of this case (a Party), or custody was given to someone who may testify in the present case (a Witness), or some other person(Other).
- J** Fill in this section only if you listed other cases in Section 7. List the name and address of the parties—other than you—involved in the other cases. For example, if someone else had asked for custody of a child, put that person's name and address. If you divorced the child's parent, put in the name and address of your former spouse.
- K** Check box only if there was an adoption and you want this form kept confidential
- L** Sign and date the form.

**(Send a copy of the form to all parties in *this* case—not to parties in any other cases)**

Every time a case is filed in court, a **DOCKET NUMBER** is assigned. This is the number the court uses to identify your case and find your case file.

Write this number on *all* papers you file in Court. Have the Docket Number handy when you come to the courthouse or call on the telephone to ask about your case.

**AFFIDAVIT DISCLOSING CARE OR CUSTODY PROCEEDINGS**  
Pursuant to Trial Court Rule IV

**TRIAL COURT OF MASSACHUSETTS**  
Name Of Case \_\_\_\_\_



**DOCKET NUMBER**  
\_\_\_\_\_

<input type="checkbox"/> Boston Municipal Court	<input type="checkbox"/> District Court Division _____	<input type="checkbox"/> Juvenile Court Division _____	<input checked="" type="checkbox"/> Probate & Family Court SUFFOLK Division _____	<input type="checkbox"/> Superior Court Division _____
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Section 1 | I, YOUR NAME HERE, hereby declare, to the best of my knowledge, information, and belief that all the information on this form is true and complete:  
(B) NAME OF PARTY (PRINT)

The name(s) of the child(ren) whose care or custody is at issue in this case are:

Section 2 | A. CHILD'S NAME HERE B. \_\_\_\_\_ C. \_\_\_\_\_  
(C) (LAST, FIRST) (LAST, FIRST) (LAST, FIRST)  
 Use only the letter appearing in front of the child's name above when referring to that child in completing the remaining sections.

Section 3 | The party filing this affidavit may request certain addresses to be kept confidential if the address is a shelter for battered persons and their dependent children, or the party filing this affidavit believes that he/she is in danger of physical or emotional abuse, or the party is filing an action under G.L.c.209A. If you believe that this provision applies to you, check the box at the right, complete sections 10 and 11 on the reverse side of this page and DO NOT complete sections 4 and 5 below.

Section 4 | The names and address of the children whose custody is at issue in this case are:  
 Address(es) \_\_\_\_\_ Address(es) During Last 2 Years, If Different \_\_\_\_\_  
 CHILD A. CHILD'S ADDRESS HERE  
 CHILD B. \_\_\_\_\_  
 CHILD C. \_\_\_\_\_

Section 5 | My address is: YOUR ADDRESS HERE

Section 6 | I  have  have not participated in and I  know  do not know of other care or custody proceedings involving the above-named child(ren) in Massachusetts or in any other state or country. (H)

Certified copies of any pleadings or determinations in a care or custody proceeding outside of Massachusetts listed in sections 7 and 8 must be filed with this affidavit unless already filed with this court or an extension for filing these documents has been granted by this court.

Section 7 | The following is a list of all pending or concluded proceedings I have participated in or know of involving the care or custody of the above-named child(ren):

Letter of Child	Court	Docket No.	Status of Case (Custody awarded to) (Date of award)	Witness (P)arty (O)ther (N)one
CHILD _____	_____	_____	_____	
CHILD _____	_____	_____	_____	
CHILD _____	_____	_____	_____	

Section 8 | The names and addresses of parties to care or custody proceedings involving any of the above-named child(ren) or those claiming a legal right to these child(ren) during the last two years (not including myself) are:  
 Letter of Child \_\_\_\_\_ Name of Party/Claimant \_\_\_\_\_ Current (or last known) Address of Party/Claimant \_\_\_\_\_  
 CHILD \_\_\_\_\_  
 CHILD \_\_\_\_\_  
 CHILD \_\_\_\_\_

Section 9 | If the box at the right is checked, this affidavit discloses the adoption of one or more of the above-named child(ren) and I am requesting the court to impound this affidavit. See instructions.

This affidavit must be personally signed by the party listed in section 1 above, unless he/she is under 18 years of age or has been adjudged incompetent in which case the attorney of record must sign. A revised affidavit must be filed with the court if new information is discovered subsequent to this filing.

Signed this DAY day of MONTH 20YEAR under the penalties of perjury.

PRINT YOUR NAME HERE  
(L) SIGNATURE OF PARTY OR ATTORNEY OF RECORD FOR INCOMPETENT/JUVENILE PRINTED NAME OF PERSON SIGNING

ADDRESS OF ATTORNEY OF RECORD FOR INCOMPETENT/JUVENILE

**THE PARTY FILING THIS AFFIDAVIT MUST FURNISH A COPY OF IT TO ALL OTHER PARTIES TO THIS ACTION.**