SUPERIOR COURT OF THE DISTRICT OF COLUMBIA FAMILY COURT

Domestic Relations Branch

	-
PRINT YOUR SPOUSE'S NAME	
STREET ADDRESS	DRB
CITY, STATE AND ZIP CODE	RELATED CASES:
PLAINTIFF, v.	
PRINT YOUR NAME	-
STREET ADDRESS	
CITY, STATE AND ZIP CODE	
☐ SUBSTITUTE ADDRESS: CHECK BOX IF YOU HAVE WRITTEN SOMEONE ELSE'S ADDRESS BECAUSE YOU FEAR HARASSMENT OR HARM.	
DEFENDANT.	
	ENT ANSWER TO DDY and/or ACCESS TO CHILDREN
I,PRINT YOUR NAME	, am the Defendant in this case.
I KINI TOUR IVAIVIE	
1. I agree with ALL of the statements Complaint for Custody and/or Access to Cl	regarding custody, numbered 1 - 13 in Plaintiff's hildren.
2. (<i>If applicable</i>) I agree with ALL of the in Plaintiff's Complaint for Custody and/or	statements regarding child support, numbered 14 - 17 Access to Children.

3. I also state that THERE ARE NO CONTESTED ISSUES for this Court to decide.

Request for Relief

I RESPECTFULLY REQUEST that the Court grant ALL the relief requested in Plaintiff's Complaint for Custody and/or Access to Children.

I ALSO REQUEST that the Court award any other relief it considers fair and proper.

involving the same claim or subject matter I do know of proceedings in the Dist	n the District of Columbia or in any state or territory as this case. trict of Columbia or in any state or territory involving ase, as listed on the first page of this Consent Answer
I solemnly swear or affirm under criminal	penalties for the making of a false statement that I
have read the foregoing Consent Answer to	o Complaint for Custody and/or Access to Children
and that the factual statements made in it a	re true to the best of my personal knowledge,
information and belief.	
	Respectfully Submitted,
	SIGN YOUR NAME
	DATE (mm/dd/yyyy)
	STREET ADDRESS
	CITY, STATE AND ZIP CODE
	TELEPHONE NUMBER
	Email Address
	☐ SUBSTITUTE ADDRESS: CHECK BOX IF YOU HAVE WRITTEN SOMEONE ELSE'S ADDRESS BECAUSE YOU FEAR HARASSMENT OR HARM.