

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY COURT
Paternity & Support Branch**

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.**

PS _____

IV-D _____

PETITIONER,

Related Cases:

v.

PRINT THE OTHER PARENT'S NAME

STREET ADDRESS

CITY, STATE AND ZIP CODE

RESPONDENT.

PETITION TO ESTABLISH PATERNITY and/or FOR CHILD SUPPORT

Are You Asking the Court to Decide Paternity? yes no

Are You Asking the Court to Decide Child Support? yes no

I, _____, am the Petitioner in this case and I state that:
PRINT YOUR NAME

1. This Court is the proper place to decide my request for establishing paternity and/or child support.

2. I state the following about paternity: [CHECK ALL THAT APPLY]

The child(ren) were born during my marriage to the other party.

The father is named on the child(ren)'s birth certificate(s).

- The other party and I have both signed a written statement under oath admitting paternity.
- The father has signed a written statement admitting paternity.
- Another state has decided paternity.
- There is a genetic test result and a certified affidavit from a laboratory indicating a 99% or greater probability of paternity.
- I may be the father.
- Other:

3. I am asking to determine paternity for the following child(ren) that I may have with the other party (through birth or adoption):

Child's Name	Current Address	Date of Birth	Gender

4. Each party has the legal duty to contribute to the support of our eligible child(ren), including any adult disabled children.

5. I state the following about Temporary Assistance to Needy Families (TANF): [CHECK ONE]

- I am I am *not* currently receiving Temporary Assistance to Needy Families (TANF).

6. I state the following about Medicaid and/or DC Healthy Families: [CHECK ONE]

- I am I am *not* currently receiving Medicaid and/or DC Healthy Families.

Request for Relief

I RESPECTFULLY REQUEST that the Court: [CHECK ALL THAT APPLY]

- Hold a hearing on this Petition within 45 days of filing and issue a Notice of Hearing and Order Directing Appearance (“NHODA”) to Respondent with the date and time of the hearing.
- Order a paternity test.
- Decide paternity for my child(ren) and order entry of the father’s name on the birth certificate for the child(ren).
- Award support according to the Child Support Guideline of the District of Columbia and other applicable laws, including:
 - current child support (support starting today and continuing into the future)
 - retroactive child support (support for time before today)
 - medical support
- Order [PRINT ANYTHING ELSE YOU WANT THIS COURT TO DO.]

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

[CHECK ONE]

- I do I do not know of any proceedings in the District of Columbia or in any state or territory involving the same claim or subject matter as this case.

I solemnly swear or affirm under criminal penalties for the making of a false statement that I have read the foregoing Petition to Establish Paternity and/or for Child Support and that the factual statements made in it are true to the best of my personal knowledge, information and belief.

Respectfully Submitted,

SIGN YOUR NAME

DATE

STREET ADDRESS

CITY, STATE AND ZIP CODE

TELEPHONE NUMBER

SUBSTITUTE ADDRESS: CHECK BOX IF YOU HAVE WRITTEN SOMEONE ELSE'S ADDRESS BECAUSE YOU FEAR HARASSMENT OR HARM.