

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF _____

_____ JUDICIAL DISTRICT

_____)
 _____)
 (Plaintiff))
 PLAINTIFF,)
 Vs)
 _____)
 (Defendant))
 DEFENDANT.)

Case No. _____

AFFIDAVIT OF PROOF FOR DEFAULT
PARENTING RESPONSIBILITY JUDGMENT

I, _____ (*Plaintiff's name*), the undersigned, state as follows:

1. I am the Plaintiff in the above-captioned civil case, which is an action to establish parenting responsibility.
2. To the best of my knowledge, no decree, judgment or order establishing parenting responsibility has been granted to either party against the other in a Court of North Dakota or a Court of any other state, territory or country, and that there is no other action pending to establish parenting responsibility by either party against the other in any Court.
3. The Defendant and I are not spouses and have never been married to each other.
4. The Defendant and I have _____ minor child(ren) together.
5. I live at _____
 _____ (*address*), I am a resident of the State of North Dakota, and have been a resident for six (6) months preceding this action.
6. I was born in _____ (*year*) and am _____ years old.
7. My Social Security Number is XXX-XX-_____ (*last 4 digits only*).

8. My current employer is _____
and the address is _____
_____.

9. The last known address of the Defendant is _____
_____.

10. The Defendant was born in _____ (year) and is _____ years old.

11. The Defendant's Social Security Number is XXX-XX-_____ (last 4 digits only).

12. The Defendant's current employer is _____
and the address is _____
_____.

13. Our minor child(ren) are as follows:

a. Minor Child's Initials: _____ Year of Birth: _____

Last 4 Digits of Social Security Number: XXX-XX-_____

(Choose one.)

The child has lived in _____ (state) for the last 6 months.

The child is less than 6 months old and has lived in _____ (state) since birth.

b. Minor Child's Initials: _____ Year of Birth: _____

Last 4 Digits of Social Security Number: XXX-XX-_____

(Choose one.)

The child has lived in _____ (state) for the last 6 months.

The child is less than 6 months old and has lived in _____ (state) since birth.

c. Minor Child's Initials: _____ Year of Birth: _____

Last 4 Digits of Social Security Number: XXX-XX-_____

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(Choose one.)

The child has lived in _____ (state) for the last 6 months.

The child is less than 6 months old and has lived in _____ (state) since birth.

14. I am the (choose one) mother / father of the minor child(ren).

15. The Defendant is the (choose one) mother / father of the minor child(ren).

16. (Choose one.)

No further children are expected to be born of this relationship.

(Choose one.) I am pregnant / The Defendant is pregnant. However, the child is not at issue in this parenting responsibility action because (choose one) I am not /

The Defendant is not the father.

17. I request that (choose one):

Residential responsibility and decision-making responsibility of the child(ren) be shared equally between me and the Defendant.

I have primary residential responsibility and decision-making responsibility of the child(ren), subject to parenting time by the Defendant.

The Defendant have primary residential responsibility and decision-making responsibility of the child(ren), subject to parenting time by me.

18. (Choose one.)

There is a child support order in effect. I do not request any changes to the child support order. The case number is _____. The Court that issued the child support order is _____.

OR

There is no child support order in effect. I request the court order the Defendant to pay child support.

19. I have submitted to the Court proposed Findings of Fact, Conclusions of Law and Order for Default Judgment, which I believe serves the best interests of our child(ren).

20. I, _____, Plaintiff, state under penalty of perjury that the information in this Affidavit of Proof is true and correct.

Dated this _____ day of _____, 20____.

(Signature of Plaintiff)

(Plaintiff's Printed Name)

(Address)

(City, State, Zip Code)

(Telephone Number)

STATE OF _____)

COUNTY OF _____)SS

Signed and sworn before me on _____, 20____ by

_____.

(Notary Public or Clerk of Court)

If notary, my commission expires: _____