

COMPLAINT FOR ESTABLISHMENT OF PARENTAGE

Vermont Family Court	County	Docket Number
Plaintiff		Defendant
VS.		

1. The child/ren who is/are the subject of this parentage action is/are:

Name of Child	Date of Birth	Name of Child	Date of Birth
Name of Child	Date of Birth	Name of Child	Date of Birth
Name of Child	Date of Birth	Name of Child	Date of Birth

2. Name and Address of Mother:

Name		
Street Address		
Town/City	State	Zip Code

Name and Address of Alleged Father:

Name		
Street Address		
Town/City	State	Zip Code

3. Plaintiff is:

- a. the Office of Child Support, the state agency to whom the mother named above has assigned rights of child support.
- b. the biological mother, named above.
- c. the biological father, named above.
- d. the child/ren named above.
- e. the personal representative of the child/ren named above.
- f. other: _____

4. Defendant is:

- a. the biological father of the child/ren named above.
- b. the biological mother of the child/ren named above.
- c. other: _____

5. The following actions for divorce, annulment, abuse prevention or separate support have been brought previously by either party against the other:

- None, or:
- A certified copy of the complaint and docket entries in the previous action is attached.

6. Plaintiff Defendant receives or has received public assistance from the VT Department of Social Welfare.

PLAINTIFF REQUESTS THE FOLLOWING RELIEF:

- 1. A determination that _____ is the biological father of the child/ren named in section 1 on other side of this form.
- 2. That the Court grant _____ legal rights and responsibilities for the minor child/ren.
- 3. That the Court grant _____ physical rights and responsibilities for the minor children.
- 4. That the Court grant _____ suitable parent/child contact.
- 5. That the Court grant _____ payment of suitable child support and medical support for the child/ren.
- 6. That the Court grant _____ suitable maintenance supplement.
- 7. That the Court grant _____ costs and attorney's fees.
- 8. That the Court grant judgment to the Office of Child Support for \$ _____ for ANFC debt due and owing by the defendant and determine a periodic amount to be paid by the defendant to be applied toward the debt.
- 9. Such other relief is just and equitable.

Signature of Plaintiff	Date
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Subscribed and sworn to before me:

Date	Signature or Notary Public	Expiration Date
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