

<input type="checkbox"/> District Court Cairo, Hope Court Address: 123 Main Street, Cairo, Hope 12345	▲ COURT USE ONLY ▲
In re: <input type="checkbox"/> The Marriage of: <input checked="" type="checkbox"/> Parental Responsibilities concerning:	
Petitioner: Mary Kim and Co-Petitioner/Respondent: Paul Stevens	Case Number:
Attorney or Party Without Attorney (Name and Address): Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Division _____ Courtroom _____
AFFIDAVIT IN SUPPORT OF MOTION TO MODIFY: <input checked="" type="checkbox"/> PARENTAL RESPONSIBILITY (CUSTODIAL ARRANGEMENTS) <input type="checkbox"/> PARENTING TIME OR <input checked="" type="checkbox"/> ALLOCATION OF DECISION-MAKING RESPONSIBILITY	

I am the Father Mother Other _____ (identify relationship) of the minor child(ren), who is/are the subject of a Motion to Modify: Parental Responsibility (Custodial Arrangements), Parenting Time, or Allocation of Decision-Making Responsibility filed with the Court on 11/28/06 (date):

I believe the modification is in the best interests of the child(ren) because:
 _____ There is a Oder of Protection against the Respondent who is the father of the children who currently has joint custody. In order to issue the order of protection, the court found that Respondent was a threat to Petitioner and their children. On more than one occasion when Respondent and Petitioner were living together Respondent assaulted Petitioner and raped her in front of the children.

I, Mary Kim, swear/affirm under oath that I have read the foregoing Affidavit and that the statements contained in this Affidavit are true to the best of my knowledge and belief.

Date: 11/28/06 _____
 Petitioner or Respondent/Co-Petitioner

9876 Maple Street
Address
Carro, Hope 12345
City, State, Zip Code
123 456 7890 (cell)
Telephone #: (home) (work) (cell)

Subscribed and affirmed, or sworn to before me in the County of Carro, State of Hope, this 28 day of Nov, 20 06.

My Commission Expires: 9/02

[Signature]
Notary Public/Deputy Clerk

CERTIFICATE OF SERVICE

I certify that on 4/28/06 (date) a true and accurate copy of the *AFFIDAVIT IN SUPPORT OF MOTION TO MODIFY: PARENTAL RESPONSIBILITY (CUSTODY ARRANGEMENTS), PARENTING TIME, OR ALLOCATION OF DECISION MAKING RESPONSIBILITY* was served on the other party by:

Hand Delivery or Faxed to this number _____ or by placing it in the United States mail, postage pre-paid, and addressed to the following:

To: Paul Stevens
11 Skynewland
Carro, Hope 12345

[Signature]
Signature