In the	Court for	C	County, State of
In re: The Marriage of	:)))	
and))))	Case No:
DECLARATION U	NDER THE UNIFOR	M CHILD	CUSTODY JURISDICTION ACT
We, the undersigned,	a	nd	, are both parties to this
proceeding to determin	e the custody of a mino	or child, and	d under oath state:
1. There is/are	minor child(r	en) subject	to this proceeding. For each child, the
name, sex, Social Secu	rity number, date and p	lace of birt	h, and time and place of residence and
name and relationship	of person child lived wi	th for the p	past 5 years, is as follows: (Attach
additional sheet if nece	ssary.)		
Child's Name:		Sex:	Date of Birth:
Place of Birth:		Social Sec	curity Number:
Present Residence:			
Person Child Lives Wit	th:		Relationship:
Dates of Residence: Fr	om:		To: Present
Previous Residence:			
Person Child Lived Wi	th:		Relationship:
Dates of Residence: Fr	om:		To:

Child's Name:	Sex : Date of Birth:
Place of Birth:	Social Security Number:
Present Residence:	
Person Child Lives With:	Relationship:
Dates of Residence: From:	To: Present
Previous Residence:	
Person Child Lived With:	Relationship:
Dates of Residence: From:	To:

- 2. Neither party has participated as a party, witness or any other capacity in any other court decision, order, or custody proceeding in this state or any other state, concerning the custody of a child subject to this proceeding.
- 3. Neither party has and information concerning any other court decision, order, or custody proceeding in this state or any other state concerning the custody of a child subject to this proceeding.
- 4. Neither party knows of any other person who is not already a party to this proceeding who has physical custody of, or who claims to have custody or visitation rights with, any child subject to this proceeding.

Dated this day of	
Wife's Signature	
Address:	
Phone:	
State of)	
County of)	
On before me,	, personally
appeared	, personally known to me (or proved to me
on	
the basis of satisfactory evidence) to be the	e person(s) whose name(s) is/are subscribed to the
within instrument and acknowledged to me	e that he/she/they executed the same in his/her/their
authorized capacity(ies), and that by his/he	er/their signature(s) on the instrument the person(s),
or the entity upon behalf of which the pers	son(s) acted, executed the instrument.
WITNESS my hand and official seal.	
SignatureID	Affiant Known Produced
Signature of Notary	Time of ID
	Type of ID(Seal)
	(Bear)

Husband's Signature	
Address:	
Phone:	
State of)	
County of)	
On before me,	, personally
appeared	, personally known to me (or proved to me
on the basis of satisfactory evidence) to be the p	person(s) whose name(s) is/are subscribed to the
within instrument and acknowledged to me that	he/she/they executed the same in his/her/their
authorized capacity(ies), and that by his/her/the	ir signature(s) on the instrument the person(s),
or the entity upon behalf of which the person(s)	acted, executed the instrument.
WITNESS my hand and official seal.	
Signature	Affiant Known Produced ID
Signature Of Notary	Type of ID
	(Seal)
IF A NONLAWYER HELPED YOU FILL OTHE BLANKS BELOW (fill in all blanks):	OUT THIS FORM THEY MUST FILL IN
	, nonlawyer located at (street)
	y)(state),
	who is the [one only]
petitioner or respondent, fill out this form.	