SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY COURT
Domestic Relations Branch

_____
PRINT OTHER PARTY'S NAME

_____
STREET ADDRESS

_____
CITY, STATE AND ZIP CODE

PLAINTIFF,

v.

_____
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.

DEFENDANT.

DR _____

Related Cases:

_____

_____

CONSENT ANSWER TO
COMPLAINT FOR CUSTODY and/or ACCESS TO CHILDREN

I, _____, am the Defendant in this case.
PRINT YOUR NAME

1. I agree with ALL of the statements regarding custody, numbered 1 - 13 in Plaintiff's Complaint for Custody and/or Access to Children.

2. (*If applicable*) I agree with ALL of the statements regarding child support, numbered 14 - 17 in Plaintiff's Complaint for Custody and/or Access to Children.

3. I also state that THERE ARE NO CONTESTED ISSUES for this Court to decide.

Request for Relief

I RESPECTFULLY REQUEST that the Court grant ALL the relief requested in Plaintiff's Complaint for Custody and/or Access to Children.

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

[CHECK ONE]

☐ 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 *do* know of proceedings in the District of Columbia or in any state or territory involving the same claim or subject matter as this case, as listed on the first page of this Answer ("Related Cases").

Respectfully Submitted,

_____
SIGN YOUR NAME

_____
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.

I, _____, solemnly swear or affirm under criminal penalties for the making of a false statement that I have read the foregoing Consent Answer to Complaint

for Custody and/or Access to Children and that the factual statements made in it are true to the best of my personal knowledge, information and belief.

_____
SIGN YOUR NAME

_____
DATE

_____
PRINT YOUR NAME