# Petitioner Pro Se

# IN THE FAMILY COURT OF THE SECOND CIRCUIT

### STATE OF HAWAII

	FC-P No.
Petitioner(s),	PETITION FOR PATERNITY; SUMMONS
vs.	
	) ) )
Respondent(s).	) ) )
<u>PETITION I</u>	FOR PATERNITY
Comes now Petitioner,	,
(hereinafter referred to as "Petitioner"),	a resident of the County of Maui, seeking an
adjudication of paternity and other relief pur	suant to Chapter 584, Hawaii Revised Statutes, and
respectfully shows that:	
	I.
Petitioner, the [ ] natural mother [	] natural father [ ] legal father of the child below
named, is:	
Name:	
aka/fka:	
Date of Birth:	
Address:	

II.
The child subject to this action is:
Name:
Sex:
Date of Birth:
Place of Birth:
Period of Conception:
Place of Conception:
III.
Mother is:
Name:
aka/fka:
Date of Birth:
Address:
IV.
The Respondent named below having had sexual intercourse with the Petitioner during
the probable period of conception of the child is joined in this action as the alleged
[ ] natural father [ ] natural mother pursuant to section 584-9, Hawaii Revised Statutes,
as amended.
Name:
aka/fka:
Date of Birth or Age:
Last Known Address:
[ ] The above-named Respondent is a member of the military service of the United
States.

V.
The legal father, if any, of the child is:
Name:
aka/fka:
Date of Birth or Age:
Date of Marriage to Natural Mother:
Date of Separation from Natural Mother:
Date of Divorce from Natural Mother:
Last Known Address:
VI.
The caretaker, if any, of the child is:
Name:
aka/fka:
Date of Birth or Age:
Relationship to Child:
Address:
VII.
[ ] Petitioner has made payments which resulted from or were incident to the natural
mother's pregnancy, the birth of the child, and post natal care and treatment of the child
and said payments create a debt due and owing by [ ] Respondent to Petitioner.
VIII.
The subject child is currently in the custody of
[ ] Petitioner [ ] Respondent [ ] Caretaker [ ]
IX.
The legal custody of the child should be awarded to
[ ] Petitioner [ ] Respondent [ ] Caretaker [ ]

Physical custody should be awarded to
[ ] Petitioner [ ] Respondent [ ] Caretaker [ ]
[ ] subject to reasonable visitation by [ ] Petitioner [ ] Respondent [ ] Caretaker
[ ]
[ ] The issue of visitation should be reserved.
X.
[ ] The Department of Health should be required to prepare a new Certificate of Live Birth
[ ] inserting thereon the name of the natural father as the father of the subject child and
[ ] changing the child's name to:
First Name:
Middle Name:
Last Name:
XI.
The gross monthly income or reasonable earning capacity of Petitioner is \$
XII.
The gross monthly income or reasonable earning capacity of Respondent is \$
XIII.
[ ] Respondent [ ] Petitioner should be ordered to pay child support based upon the
gross income of the parties and calculated pursuant to Hawaii Revised Statutes section
576D-7 and Hawaii Child Support Guidelines.
••
XIV.
[ ] Respondent [ ] Petitioner should be ordered to provide medical, dental, drug and
vision coverage for the subject child.

# XV.

The child is still alive and has not been adopted or emancipated.

WHEREFORE, PETITIONER res	spectfully prays that:	
[ ] The Respondent(s) be compel	led to appear before the above entit	led court for a
hearing pursuant to Chapter 584,	Hawaii Revised Statutes.	
[ ]be a	djudged to be the legal and natural f	father of the child.
[ ] The presumption of paternity	of Respondent	is
rebutted.		
[ ] Legal custody of the child be	awarded to	, physical
custody awarded to	, subject to	rights
of reasonable visitation.		
[ ]	should be ordered to pay	for the support,
maintenance and education of the	child from the time of birth until the	e child attains the
age of 18 years of age and for so l	ong thereafter, including summer m	onths, as said child
is pursuing a high school diploma	or is enrolled as a full time student	in an accredited
educational, vocational or technic	al institution and under the age of 23	3.
[ ] Current child support should	be paid pursuant to an order of income	me assignment.
[ ]	should be ordered to pay past c	hild support
accrued from the time of the birth	of the subject child up until the time	e of the entry of a
current support order herein.		
[ ]	should be ordered to provide n	nedical, dental, drug
and vision insurance coverage for	the child.	
[ ]	should be ordered to provide m	ilitary benefits for
the subject child.		
[]	should be ordered to pay or make	ke reimbursement
for his or her share of the expense	s resulting from or incident to the pr	regnancy and birth
of the subject child.		
[ ] The Department of Health sha	all issue a new certificate of live birt	th for the child

inserting the name of the natural father	as the father of the subject child [ ] and changing
the name of the child.	
[ ] The Court order such other relief a	s may be appropriate under the provisions of
chapter 584, Hawaii Revised Statutes.	
DATED:, Hawaii	
<u>(</u>	PETITIONER'S signature)

#### IN THE FAMILY COURT OF THE SECOND CIRCUIT

#### STATE OF HAWAII

		)	FC-P No.
VS.	Petitioner(s),	) ) ) ) )	SUMMONS
	Respondent(s).	) ) )	

#### TO THE DEFENDANT:

YOU ARE HEREBY SUMMONED and required to serve a written answer to the attached Petition, within 20 days after service of this Summons upon you, exclusive of the date of service.

Your written answer must be filed with the Chief Clerk of the Second Circuit at the following address:

CIRCUIT COURT OF THE SECOND CIRCUIT STATE OF HAWAII Hoapili Hale 2145 Main Street Wailuku, Hawaii 96793

A copy of your answer should also be served upon the Petitioner's attorney, or in the event Petitioner is not represented by an attorney, upon the Petitioner at the address shown on the attached Petition.

If you fail to file your written answer within the 20 day time limit, or fail to appear on the day of the trial, further action may be taken in this case, including judgment for the relief demanded in the Petition, without further notice to you.

#### IT IS ALSO ORDERED:

1. Both parties shall appear at the Family Court of the Second Circuit, Hoapili Hale,

2145 Main Street, Wailuku, Maui, Hawaii for a hearing on this Petition onatm. in Courtroom
THIS SUMMONS SHALL NOT BE PERSONALLY DELIVERED BETWEEN 10:00 P.M. AND 6:00 A.M. ON PREMISES NOT OPEN TO THE PUBLIC, UNLESS A JUDGE OF THE DISTRICT OR CIRCUIT COURTS PERMITS, IN WRITING ON THE SUMMONS, PERSONAL DELIVERY DURING THOSE HOURS.
FAILURE TO OBEY THE SUMMONS MAY RESULT IN AN ENTRY OF A DEFAULT AND DEFAULT JUDGMENT AGAINST THE PERSONS SUMMONED.
In accordance with the Americans with Disabilities Act and other applicable state and federal laws, if you require reasonable accommodation for a disability, please contact the ADA Coordinator at the Family Court Administrati Office at PHONE NO. 244-2700, FAX 244-2704 OR TTY 244-2889 at least ten (10) working days prior to your heari or appointment date. For all Civil related matters, please call 244-2706 or visit the Service Center at 2145 Main Stre Room 141, Wailuku, HI 96793
Dated:, Hawaii,
CLERK OF THE ABOVE-REFERENCED COURT

#### **Americans with Disabilities Act Notice**



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation:

Call (808) 244-2855 FAX (808) 244-2932 OR Send an e-mail to: adarequest@courts.hawaii.gov. The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.