

(Name, Address and Phone Number)

Petitioner Pro Se

IN THE FAMILY COURT OF THE SECOND CIRCUIT

STATE OF HAWAI'I

)	FC-____ No. _____
)	
)	AFFIDAVIT OF PETITIONER
Petitioner(s),)	
)	
vs.)	
)	
)	
)	
Respondent(s).)	
_____)	

AFFIDAVIT OF PETITIONER

STATE OF HAWAI'I)
)
 COUNTY OF MAUI)

SS.

I, _____, Petitioner in the above-entitled action depose and state that:

1. The child subject to this action is:

Name:

Sex:

Date of Birth:

Place of Birth:

Period of Conception:

Place of Conception:

2. I am not the father of _____, born _____, as I did not have access to _____, the Natural Mother, during the child's conception period.

AFFIANT FURTHER SAYETH NAUGHT.

DATED: _____, Hawai'i _____

Petitioner Pro Se

STATE OF HAWAII)
)
COUNTY OF MAUI) SS.

On this _____ day of _____, 20____ before me personally appeared _____, to me known to be the person described in and who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed.

Notary Public, Second Judicial Circuit
State of Hawaii

My Commission Expires: _____

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.