

(Name, Address and Phone Number)

Respondent Pro Se

IN THE FAMILY COURT OF THE SECOND CIRCUIT

STATE OF HAWAII

)	FC-___ NO. _____
)	
)	ANSWER TO PETITION FOR
)	CUSTODY AND SUPPORT ORDERS
Petitioner,)	AFTER VOLUNTARY
)	ESTABLISHMENT OF PATERNITY
vs.)	
)	Hearing Date:
)	Hearing Time:
)	
)	
Respondent.)	
_____)	

ANSWER TO PETITION FOR CUSTODY AND SUPPORT
ORDERS AFTER VOLUNTARY ESTABLISHMENT OF PATERNITY

I, Respondent above-named, answer the petition filed in this case and assert:

1. I agree with paragraph(s) _____.
2. I do not agree with paragraph(s) _____.

3. In particular, I wish to tell the court, and request,

4. I deny anything stated in the Petition that I have not specifically admitted, qualified or denied.

I ASK THE COURT:

(a) to [] award attorney's fees and costs, and/or [] award custody, visitation, support, and education of the subject children.

(b) to grant any temporary relief as may be requested in connection to this case.

DATED: _____, Maui, Hawai'i, _____.
(City) (Date)

Respondent Pro Se

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.