

\_\_\_\_\_  
Name

\_\_\_\_\_  
Law Firm (if applicable)

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Telephone and Fax Number (if any)

\_\_\_\_\_  
Email Address

☐ Self-Represented Party

☐ Attorney for  
Attorney# \_\_\_\_\_

**STATE OF HAWAI'I, FAMILY COURT**

CASE NO.: \_\_\_\_\_

**AFFIDAVIT OF FUNCTIONAL PARENT  
FOR UNCONTESTED PARENTAGE  
ACTION**

Petitioner(s),  
vs,

☐ and CHILD SUPPORT ENFORCEMENT  
AGENCY, STATE OF HAWAI'I,

Respondent(s).

**AFFIDAVIT OF FUNCTIONAL PARENT FOR UNCONTESTED PARENTAGE ACTION**

**STATE OF HAWAI‘I, \_\_\_\_\_ (COUNTY)**  
**AFFIDAVIT OF FUNCTIONAL PARENT**  
**FOR UNCONTESTED PARENTAGE ACTION**

I, [Print your Name] \_\_\_\_\_

being first duly sworn under oath, deposes and says as follows:

I am filing this Affidavit as the ☐ Petitioner in the above-entitled action, and as a Functional Parent.

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***[Complete this section only if you are filing the uncontested parentage action as the Petitioner]***

\_\_\_\_\_ ***[Initial if applicable]*** As the Petitioner in this matter, I elect to have this case decided as an uncontested parentage action. I request the Court enter the proposed judgment and orders without requiring my appearance at a hearing. I certify the proposed judgments and orders reflect agreements between myself and the Respondent(s).

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1. My current address is: \_\_\_\_\_  
\_\_\_\_\_

2. Legal Representation: ☐ I am a self-represented litigant.  
☐ I am represented by the legal counsel named above.

3. Jurisdiction: (check all that apply)

☐ 3a. I was domiciled on the Island of \_\_\_\_\_, State of Hawai‘i, at the commencement of this action.

☐ 3b. The Child(ren) was/were conceived by sexual relations or by assisted reproduction that occurred in the State of Hawai‘i.

☐ 3c. The Child(ren) was/were born on the Island of \_\_\_\_\_, State of Hawai‘i.

☐ 3d. I currently reside in the \_\_\_\_\_(county) in Hawai‘i.

4. The child(ren) who are the subject of this parentage action are as follows:

4a. Name: \_\_\_\_\_  
\_\_\_\_\_

Sex \_\_\_\_\_ Birth Date: \_\_\_\_\_

4b. Name: \_\_\_\_\_  
\_\_\_\_\_

Sex \_\_\_\_\_ Birth Date: \_\_\_\_\_

4c. Name: \_\_\_\_\_  
\_\_\_\_\_

Sex \_\_\_\_\_ Birth Date: \_\_\_\_\_

**[ADD SEPARATE SHEET IF NEEDED]**

5. As the Functional Parent, I allege the following in support of my claim: (check all that apply)

☐ 5a. I resided with the child(ren) as a regular member of the child(ren)'s household for a significant period;

☐ 5b. I engaged in consistent care-taking of the child;

☐ 5c. I undertook full and permanent responsibilities of a parent of the child(ren) without expectation of financial compensation;

☐ 5d. I held out the child(ren) as my own child(ren).

☐ 5e. I established a bonded and dependent relationship with the child(ren) that is parental in nature;

☐ 5f. Another parent of the child(ren) fostered or supported the bonded and dependent relationship between myself and the child(ren).

5f(1). State the name of the parent. \_\_\_\_\_

☐ 5g. Continuing the relationship between myself and the child(ren) is in the child(ren)'s best interest for the following reasons:

**[ADD SEPARATE SHEET IF NEEDED]**

6. Language Comprehension:

☐ 6a. I fully understand the English Language.

☐ 6b. Although I do not fully understand written English, this document has been explained to me by \_\_\_\_\_ and based on that explanation, I understand this document.

☐ 7a. I have carefully reviewed the proposed Stipulated Judgment of Parentage and agree with the Judgment. I therefore request that the Court determine parentage and adjudicate me as the legal parent for the Child(ren).

☐ 7b. I have carefully reviewed the proposed Stipulated Order for Custody, Visitation, and Support. I agree with the terms regarding parentage and awarding custody, visitation and support. I therefore request the Court grant the orders as stated in the proposed Stipulated Order for Custody, Visitation, and Support.

8. Prior or Pending Custody/Support Proceedings:

☐ 8a. I have not participated in any capacity in any lawsuit or proceeding in any state concerning the custody or support of the minor child(ren) in this action. I have no knowledge of any pending custody or support proceeding or of any person not a party to this proceeding who has physical custody or claims to have custody or visitation rights concerning any minor child(ren) of this action.

8b. Pending/prior custody or support case involving the Child(ren)

Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_

Location (City, State) of Court: \_\_\_\_\_

Date Filed: \_\_\_\_\_ Date Concluded: \_\_\_\_\_

Type of Case: \_\_\_\_\_

8c. Other pending/prior custody or support case involving the Child(ren)

Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_

Location (City, State) of Court: \_\_\_\_\_

Date Filed: \_\_\_\_\_ Date Concluded: \_\_\_\_\_

Type of Case: \_\_\_\_\_

9. I declare that I have read this Affidavit and am signing it voluntarily without coercion or duress and not because I was told to do so.

10. I understand that my signature under oath before a notary public is my solemn statement that I read this Affidavit and that these statements are true, correct, and completed to the best of my knowledge and belief.

DATE:	SIGNATURE (MUST BE SIGNED BEFORE A NOTARY PUBLIC):	
Document Title: _____ Document Date: _____ Number of pages: _____ was subscribed and sworn to before me in the _____ Circuit, State of Hawai'i by: _____ Notary Public's Signature: _____ Date: _____ in the _____ Circuit, State of Hawai'i Print Notary Public's Name: _____ My commission expires on: _____		

(Notary Seal)