

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 GENETIC PARENT FOR  
UNCONTESTED PARENTAGE ACTION**

Petitioner(s),

vs,

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

Respondent(s).

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

STATE OF HAWAI'I, \_\_\_\_\_ (COUNTY)  
**AFFIDAVIT OF GENETIC 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  Respondent in the above-entitled action, and as a Genetic Parent.

***[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: \_\_\_\_\_

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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 been 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 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 \_\_\_\_\_ (county) in Hawai'i.

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

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

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

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

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

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

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

**[Attach Separate Sheet if Needed]**

5. At the commencement of this case, I was the alleged genetic parent. On \_\_\_\_\_(date) I submitted to court-ordered genetic testing and the results do not exclude the possibility of parentage of the Child(ren).
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.
7. a. I have carefully reviewed the proposed Stipulated Judgment of Parentage and agree its terms. I therefore request that the Court adjudicate me as a parent of the above minor 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 for custody, visitation, and support as stated in the submitted 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 these statements are true, correct, and completed to the best of my knowledge and belief.

DATE:	SIGNATURE <b>(MUST BE SIGNED BEFORE A NOTARY PUBLIC):</b>	
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)