

SUPPLEMENTAL CHILD CARE OR CUSTODY DISCLOSURE AFFIDAVIT
(Trial Court Rule IV)

G.L. c. 119 (except delinquency actions under G.L. c. 119), G.L. c. 190B, G.L. c. 207,
 G.L. c. 208, G.L. c. 209, G.L. c. 209A, G.L. c. 209B, G.L. c. 209C, G.L. c. 210

**Massachusetts
Trial Court**



COURT DEPARTMENT (Select only one court.) COURT DIVISION OR COUNTY		DOCKET NUMBER	
<input type="checkbox"/> Boston Municipal Court <input type="checkbox"/> District Court <input type="checkbox"/> Juvenile Court <input type="checkbox"/> Probate & Family Court <input type="checkbox"/> Superior Court			
CASE NAME:			
The name(s) of the additional child(ren) whose care or custody is/are at issue in this case is/are:			
CHILD E. _____ (First and Last Name)		CHILD F. _____ (First and Last Name)	
CHILD G. _____ (First and Last Name)		CHILD H. _____ (First and Last Name)	
Address information for any additional child(ren):			
List the address(es) of the above-named child(ren) for the last two years :			
CHILD E <input type="checkbox"/> Check if same information as "CHILD E"	Current Address: Previous Address:	From _____ to present. From _____ to _____	Adult(s) the child lives with: Relationship to child: Adult(s) the child lived with: Relationship to child:
CHILD F <input type="checkbox"/> Check if same information as "CHILD ___"	Current Address: Previous Address:	From _____ to _____	Adult(s) the child lives with: Relationship to child: Adult(s) the child lived with: Relationship to child:
CHILD G <input type="checkbox"/> Check if same information as "CHILD ___"	Current Address: Previous Address:	From _____ to _____	Adult(s) the child lives with: Relationship to child: Adult(s) the child lived with: Relationship to child:

CHILD H <input type="checkbox"/> Check if same information as "CHILD ____"	Current Address: From _____ to _____	Adult(s) the child lives with: Relationship to child:
	Previous Address: From _____ to _____	Adult(s) the child lived with: Relationship to child:

Care or custody proceeding information for any additional child(ren):

	Court Location	Case Type/Docket No.	Open/Closed	Party/Witness/Other
CHILD	_____	_____	_____	_____
CHILD	_____	_____	_____	_____
CHILD	_____	_____	_____	_____
CHILD	_____	_____	_____	_____

Were any attorneys, *guardians ad litem* (GALs), probation officers, court investigators, or court evaluators appointed in any care or custody proceeding (case) for any child(ren) listed? If "Yes," provide that information below.

Person(s) appointed?

Name and Title of Person(s) Appointed (if known)

CHILD E Yes No Do Not Know

CHILD F Yes No Do Not Know

CHILD G Yes No Do Not Know

CHILD H Yes No Do Not Know

CHILD H Yes No Do Not Know _____

List any other party involved in the last two years in a care or custody case involving any of the above-named child(ren). This includes a Child Requiring Assistance (CRA) matter. (For example, list any other person(s) who can claim a legal

Name of Party

Current (or last known) Address of Party

CHILD

CHILD

CHILD

CHILD

I signed this Affidavit under the penalty of perjury. I now declare that, to the best of my knowledge, all the information in this Affidavit is true and complete. I must file a new updated Affidavit if I find any new information or if I learn of any new custody cases that start after I file this Affidavit with the court.

PRINT CLEARLY OR TYPE YOUR NAME	SIGNATURE	DATED
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