

Circuit Court for \_\_\_\_\_ Case No. \_\_\_\_\_  
City or County

Name \_\_\_\_\_ Name \_\_\_\_\_  
Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_ vs. Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Area Code \_\_\_\_\_ Telephone \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Area Code \_\_\_\_\_ Telephone \_\_\_\_\_  
*Plaintiff* *Defendant*

**COMPLAINT FOR CUSTODY**  
**(Dom.Rel. 4)**

I, \_\_\_\_\_, representing myself, state that:  
My name

1. I am the mother/father or \_\_\_\_\_  
Circle One Relationship (for example, aunt, grandfather, guardian, etc.)

of the following minor child(ren):

_____	_____	_____	_____
Name	Date of Birth	Name	Date of Birth
_____	_____	_____	_____
Name	Date of Birth	Name	Date of Birth
_____	_____	_____	_____
Name	Date of Birth	Name	Date of Birth

2. \_\_\_\_\_ is the mother/father or \_\_\_\_\_  
The Opposing Party Circle One Relationship

of the child(ren)

3. The child(ren) live(s) at \_\_\_\_\_  
Address  
with \_\_\_\_\_  
Name of Person

4. I know of the following cases concerning the child(ren) (such as paternity, divorce of the child(ren)'s parents, custody, visitation, or juvenile court cases):

<u>Court</u>	<u>Kind of Case</u>	<u>Year Filed</u>	<u>Results or Status (if you know)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. It is in the best interests of the child(ren) to be in my custody because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR THESE REASONS, I request the Court (check all that apply):**

- Grant me custody of the child(ren) and
  - Allow \_\_\_\_\_ to visit with the child(ren).  
Name
  - Allow \_\_\_\_\_ to visit with the child(ren) on  
Name  
the following terms: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - Allow no visitation because \_\_\_\_\_  
Reasons
- Order \_\_\_\_\_ to pay health insurance for child(ren).  
Name
- Order \_\_\_\_\_ to pay child support (attach Financial  
Name  
Statement. Use Form Dom.Rel. 30 or Dom.Rel. 31).
- (State other requests relating to the children) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Order any other appropriate relief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name