

9. Paternity has not been established and I request that genetic testing be done.
10. Paternity has been established (choose one of the following)
- The father has acknowledged his paternity of the minor child(ren) in writing filed with the Department of Vital Statistics in the State in which the child(ren) was/were born.
 - The father has consented to paternity and is named on the birth certificate.
 - Paternity of the minor child(ren) has/have been established by blood tests.
 - The father has openly held out the minor child(ren) as his natural child(ren) and established a personal, financial or custodial relationship with the child(ren).

III. RESIDENCE OF THE CHILDREN

11. The child(ren) has/have lived in the State of New Mexico for 6 months without interruption immediately preceding the filing of this petition.

- Yes No

12. During the past five years, the minor child(ren) has/have lived with the following persons, for the following periods of time, at the following places :

Name of Child	Name and current address of person child lived with or is living with	Relationship to Child	Dates child lived there	
			Beginning Date	Ending Date

IV. PREVIOUS LITIGATION

13. I have participated, as a party **or witness** or in some other capacity, in other proceedings concerning the custody of or visitation with our child(ren) NO
 YES (if you check yes then fill in chart)

Case Name	Case Number	Name of Court	Location of Court

V. PENDING LITIGATION

14. I know of other proceedings that could affect this current case, in New Mexico or any other state involving domestic violence, protective orders, termination of parental rights and adoptions

- NO
- YES (if you check yes then fill in chart)

Case Name	Case Number	Name of Court	Location of Court

VI. OTHER CUSTODY AND VISITATION CLAIMS

15. Besides me and the opposing party, there are other persons who claim to have legal custody, physical custody or visitation of our child(ren).

- NO
- YES (if you check yes then fill in chart)

Name of child	Name and Address of Person	Claims
		<input type="checkbox"/> claims custody rights
		<input type="checkbox"/> claims visitation rights
		<input type="checkbox"/> has physical custody

Name of child	Name and Address of Person	Claims
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Name of child	Name and Address of Person	Claims
		<input type="checkbox"/> claims custody rights
		<input type="checkbox"/> claims visitation rights
		<input type="checkbox"/> has physical custody

VII. LEGAL CUSTODY

Choose only one of the following:

16. It is in the best interest(s) of the child(ren) that we both be awarded joint legal custody of our minor child(ren). Together, we will make major decisions that affect the child(ren).
17. I should be awarded sole legal custody of the child(ren). Only I will make the major decisions that affect the child(ren). This is in the best interest(s) of the minor child(ren)

because: _____

18. The other party should be awarded sole legal custody of the child(ren). Only he/she will make the major decisions that affect the child(ren). This is in the best interest(s) of the child(ren) because: _____

19. The parties should be awarded joint legal custody of the minor child(ren), with _____ having primary physical custody. _____ should have parenting time consistent with the best interests of the child(ren).

20. I should be awarded sole legal and physical custody of the child(ren) subject to the other parent's reasonable rights of visitation. Sole legal and physical custody is in the best interest of the minor child(ren) because: _____

VIII. PHYSICAL CUSTODY

21. The court should award primary physical custody of _____
(child's name) to: Me Other Parent

Visitation with that child for the other party should be as follows: (choose all that apply)

<input type="checkbox"/> Once a week <input type="checkbox"/> Every other weekend <input type="checkbox"/> Once a month <input type="checkbox"/> Once every other week
<input type="checkbox"/> The following holidays: _____
<input type="checkbox"/> The following times during summer vacations: _____
<input type="checkbox"/> Other: _____

The court should award primary physical custody of _____
(child's name) to: Me Other Parent

Visitation with that child for the other party should be as follows: (choose all that apply)

Once a week Every other weekend Once a month Once every other week

The following holidays: _____

The following times during summer vacations: _____

Other: _____

The court should award primary physical custody of _____
(child's name) to: Me Other Parent

Visitation with that child for the other party should be as follows: (choose all that apply)

Once a week Every other weekend Once a month Once every other week

The following holidays: _____

The following times during summer vacations: _____

Other: _____

The court should award primary physical custody of _____
(child's name) to: Me Other Parent

Visitation with that child for the other party should be as follows: (choose all that apply)

Once a week Every other weekend Once a month Once every other week

The following holidays: _____

The following times during summer vacations: _____

Other: _____

IX. CHILD SUPPORT

Check below all that apply:

22. A court order involving child support has already been issued in :

Case Number _____ Court _____ State _____.

23. Child support should be set according to the New Mexico Child Support Guidelines and the Respondent should be ordered to pay child support in an amount as determined by the Child Support Guidelines and Worksheet.
24. I request immediate child support during the pendency of this case, in accordance with the New Mexico Child Support Guidelines.
25. I request that child support go back to the birth of the child(ren), and that the amount of child support be in accordance with the New Mexico Child Support Guidelines.
26. I request that the opposing party be ordered to pay the birthing expenses, including hospital and medical expenses, incurred by mother in the amount of \$_____.

X. INSURANCE AND EXPENSES

27. _____ should provide health and dental insurance for the minor child(ren).
28. _____ should pay 100% of the child(ren)'s health and dental expenses not paid by the insurance.
29. The child(ren) are covered under Medicaid.
30. The parties should each pay one-half of the child(ren)'s health and dental expenses not paid by insurance.
31. The parties should pay the child(ren)'s health and dental expenses not paid by insurance in the percentages shown on the child(ren) support worksheet.

XI. CHANGING OF RECORDS

32. Upon determination of paternity, the Department of Vital Statistics should be ordered to change the birth record of the minor child(ren) to reflect the paternity as determined by this court.

33. I request that the child(ren)'s names be changed to the following

From: _____ To: _____

Reason: _____

From: _____ To: _____

Reason: _____

XIII. REQUEST FOR RELIEF

WHEREFORE, I ask the Court to:

1. Establish the paternity of the minor child(ren).

2. Make appropriate orders regarding custody, visitation, and support in accordance with this Petition.
3. Grant such other and further relief as the Court deems just and equitable.

Respectfully Submitted,

Signature

Print Name

Address

City, State, Zip Code

Phone Number

XIV. VERIFICATION

STATE OF NEW MEXICO)
)ss.
COUNTY OF)

I, _____, having been duly sworn upon my on oath, deposes and states that I am the Petitioner in the above entitled proceeding for Parentage. I have read the attached Petition for Parentage. I state the contents of this Petition are true and correct, except as to matters stated on information and belief, as to such, I believe them to be true.

Signature (must be signed in front of a notary)

SIGNED AND SWORN before me on this
____ day of _____, 20____.

Notary Public

My Commission Expires : _____