STATE OF VERMONT

SUPERIOR COURT **FAMILY DIVISION**

Unit **Docket No.**

Plaintiff Name	v.	Defendant Name

NOTICE OFAPPEARANCE and INTENT TO REPRESENT MYSELF

I intend to represent myself and hereby enter my appearance with the Court. No attorney will represent me in this case unless an attorney or I notify the Court otherwise.

I understand that IT IS MY RESPONSIBILITY TO:

1. **Notify the Court in writing if I change my address or phone number; and**
2. **Send copies of any papers I file with the Court to the other party in this case.**

All Court papers may be mailed to me by first class mail at the address listed below.

Name: _____

Street Address: _____ City/State/Zip: _____

Mailing Address *(if different from Street Address)*: _____

City/State/Zip: _____ Email Address: _____

Daytime Phone: _____ Evening Phone: _____

ANSWER TO COMPLAINT

I am the Defendant in this case. This is my answer to the facts in the Plaintiff's Complaint: *(Please refer to the Plaintiff's Complaint and check whether you agree or disagree with the facts in each paragraph of the Complaint.)*

		Agree	Disagree	Don't Know
1.	Minor Children of the Parties	☐	☐	[redacted]
2.	Relationship of Plaintiff to Children	☐	☐	
3.	My relationship to the Children	☐	☐	
4.	Facts related to the UCCJEA Jurisdiction	☐	☐	☐
5.	Public Assistance	☐	☐	[redacted]
6.	Earlier Actions for Parentage or Separate Support	☐	☐	
7.	Relief from Abuse or protective order proceedings	☐	☐	
8.	Military Status	☐	☐	

If you disagree with any of the facts in Plaintiff's Complaint, please write the paragraph number below and state the facts you believe to be true:

COUNTERCLAIM

I ask that the Family Court grant me *(check each box that applies)*:

1. ☐ Parentage Order:
   A determination that _____ and _____
   are the natural or adoptive parents of the children named in section one of this Complaint.
2. ☐ Parental Right and Responsibilities
   Legal parental rights and responsibilities:
   - ☐ Shared jointly
   - ☐ Given solely to
     - ☐ Myself
     - ☐ Plaintiff

   Physical parental rights and responsibilities:
   - ☐ Shared jointly
   - ☐ Given solely to
     - ☐ Myself
     - ☐ Plaintiff
3. ☐ Parent Child Contact for:
   - ☐ Myself
   - ☐ Plaintiff
4. ☐ Child support and medical support for the minor children.
5. ☐ Court costs.
6. ☐ Attorney fees.

I hereby swear or affirm that the information above is true to the best of my knowledge and belief.

Dated

_____ _____

Signature Defendant

Signed and sworn to or affirmed before me:

Date	Signature of Notary Public	Expiration Date