COMPLAINT FOR A TEMPORARY ORDER OF SUPPORT G.L. c. 119, § 28	DOCKET NUMBER	**Trial Court of Massachusetts** **Juvenile Court Department**

DIVISION

1. Plaintiff, _____ , who resides at
(print or type full name)

_____ is
(street and no.) (city or town) (county) (state) (zip code)

- ☐ child
- ☐ mother
- ☐ father
- ☐ guardian/custodian
- ☐ parent/personal representative of the mother/father of the child
- ☐ the Department of Children and Families/agency licensed under G. L. c. 28A
- ☐ the Department of Transitional Assistance/Department of Revenue

2. The child for whom support is sought:

_____
(name) (date of birth) (social security number)

_____
(street and no.) (city or town) (county) (state) (zip code)

3. Defendant(s) is/are:

Name: _____ _____
Address: _____ _____
_____ _____
_____ _____
DOB: _____ _____
SSN: _____ _____
Relationship to child: _____ _____

4. Are the child's mother and father currently married to each other? ☐ Yes ☐ No
If no, are mother and father divorced or separated? ☐ Yes ☐ No

5. If the answers to Question No. 4 are no, has paternity been adjudicated? ☐ Yes ☐ No
If yes, date paternity was adjudicated _____ Court _____

6. Who has custody of the child? _____

7. A copy of the child's birth certificate is attached.

WHEREFORE, the plaintiff requests that the Court:

- ☐ order a suitable amount of support for said child.
- ☐ order the defendant to maintain/provide health insurance for the benefit of the child.
- ☐ _____

Date: _____

_____
Signature of Attorney, or Plaintiff, if pro se

_____
Address

_____

_____

Telephone No. _____

BBO No. _____

This matter shall be heard in conjunction with the petition filed pursuant to G. L. c. 119, § 24.