

**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)

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

- 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.