STATE OF NORTH CAROLINA

_____ County

Court File No.

In The General Court Of Justice
District Court Division

Name And Address Of Plaintiff

VERSUS

Name And Address Of Defendant

AFFIDAVIT AS TO STATUS OF MINOR CHILD

G.S. 50A-209

Name Of Minor Child

Date Of Birth | Birthplace

I, the undersigned affiant, being first duly sworn, say that during the past five (5) years the above named minor child has lived as follows:

Period Of Residence		Address	Name Of Person Lived With	Present Address Of Person
From	To			
	Present			

I further say that: *(Check those that apply)*

☐ I have participated in litigation concerning the custody of the above named child.

Capacity As Participant

Name And Address Of Court

Date Of Child Custody Determination | Case No.

Details

☐ I have information about a custody proceeding. Examples of custody proceeding include divorce, proceeding related to domestic violence, a protective order, termination of parental rights or adoption that is pending in a court of this or another state and could affect this proceeding.

Name And Address Of Court

Details (include case number and describe nature of the proceeding)

☐ I know of a person as listed below, who has physical custody or claims to have custody or visitation rights with respect to the above named child.

Name And Address Of Person

☐ Physical Custody
☐ Claimed Custody
☐ Visitation Rights

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

Date

Date | Signature Of Person Authorized To Administer Oaths

Signature Of Affiant

☐ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior Court ☐ Magistrate

Name Of Affiant (type or print)

☐ Notary

Date My Commission Expires

Relationship To Above Named Child

SEAL

County Where Notarized