

_____	:	
Name	:	
	:	
Plaintiff	:	IN THE COURT OF COMMON PLEAS
vs.	:	
_____	:	
Name	:	WAYNE COUNTY, PENNSYLVANIA
	:	
Defendant	:	NO. ____-____-DR

ORDER

You, _____, (defendant) (respondent), have been sued in Court to [obtain] [modify]: (shared legal custody) (sole legal custody) (partial physical custody) (primary physical custody) (shared physical custody) (sole physical custody) (supervised physical custody) of the following children:

(Names & Dates of birth)

You are Ordered to appear **in person** at the Wayne County Courthouse, Honesdale, Pennsylvania on _____ at _____m. for a:
 ___ Conciliation Conference, Arbitration Room, 4th Floor, Courthouse Annex.
 ___ Hearing before the Court, Courtroom No. 2, 4th Floor, Courthouse Annex.

Appointed Master: Warren Schloesser, Esq. Pamela S. Wilson, Esq. Other: _____

If you fail to appear as provided by this Order, an Order for custody may be entered against you or the Court may issue a warrant for your arrest.

You must file with the court a verification regarding any criminal record or abuse history regarding you and anyone living in your household on or before the initial in-person contact with the court (including, but not limited to, a conference with a conference officer or judge or conciliation) but not later than 30 days after service of the complaint or petition.

No party may make a change in the residence of any child which significantly impairs the ability of the other party to exercise custodial rights without first complying with all of the applicable provision of 23 Pa.C.S. § 5337 and Pa.R.C.P. No. 1915.17 regarding relocation.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP.

Northern Pennsylvania Legal Services
925 Court Street
Honesdale, Pa. 18431
(877) 953-4250

AMERICANS WITH DISABILITY ACT OF 1990

The Court of Common Pleas of Wayne County, Pennsylvania is required by law to comply with the Americans with Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business with the Court, please contact the Court Administrator at (570) 253-0101. All arrangements must be made at least 72 hours before any hearing or business before the Court.

You must attend the scheduled conference or hearing.

BY THE COURT:

DATE _____

_____ J.

Name	:	
	:	
Plaintiff	:	IN THE COURT OF COMMON PLEAS
vs.	:	
Name	:	WAYNE COUNTY, PENNSYLVANIA
	:	
Defendant	:	NO. ____-____-DR

COMPLAINT FOR CUSTODY

1. The Plaintiff (name) _____
resides at (street, city, state, zip code, county) _____

2. The Defendant (name) _____
resides at (street, city, state, zip code, county) _____

3. Plaintiff seeks (circle all that apply): (shared legal custody) (sole legal custody) (partial physical custody) (primary physical custody) (shared physical custody) (sole physical custody) (supervised physical custody) of the following child(ren):
 - Name: _____ DOB: _____
 - Address: _____

 - Name: _____ DOB: _____
 - Address: _____

 - Name: _____ DOB: _____
 - Address: _____

 - Name: _____ DOB: _____
 - Address: _____

4. The child (select one): (was) (was not) born out of wedlock.

5. The child(ren) is/are presently in the custody of (name) _____
who resides at (street, city, state) _____

6. During the past five years, the child(ren) has/have resided with the following persons and at the following addresses: _____

7. The parents of the child(ren) are :
Mother: _____
Address currently residing at _____

She is: (married) (divorced) (single).

Father: _____
Address currently residing at _____

He is: (married) (divorced) (single).

8. The relationship of plaintiff to the child(ren) is that of _____

9. The plaintiff currently resides with the following person/s: _____

10. The relationship of defendant to the child(ren) is that of _____

11. The defendant currently resides with the following person/s: _____

12. The plaintiff (circle one): **(has)** or **(has not)** participated as a party or witness or in another capacity in other litigation concerning the custody of the child(ren) or knows information of a custody proceeding concerning the child(ren) in this or another court. The court, term and number, and its relationship to this action is: _____

13. Plaintiff (circle one): **(knows)** or **(does not know)** of a person not a party to the proceedings who has physical custody of the child or claims to have custodial rights with respect to the child. The name and address of such person is: _____

14. The best interest and permanent welfare of the child will be served by granting the relief requested because _____

15. Each parent whose parental rights to the child have not been terminated and the person who has physical custody of the child have been named as parties to this action. All other persons, named below, who are known to have or claim a right to custody of the child will be given notice of the pendency of this action and the right to intervene:

Name	Address	Basis of Claim
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

16. If the plaintiff is a grandparent who is not in loco parentis to the child and is seeking physical and/or legal custody pursuant to 23 Pa.C.S. § 5323, you must plead facts establishing standing pursuant to 23 Pa.C.S. § 5324(3) _____

17. If the plaintiff is a grandparent or great-grandparent who is seeking partial physical custody or supervised custody pursuant to 23 Pa.C.S. § 5325, you must plead facts establishing standing pursuant to § 5325.

18. If the plaintiff is a person seeking physical and/or legal custody pursuant to 23 Pa.C.S. § 5324(2) as a person who stands in loco parentis to the child, you must plead facts establishing standing.

19. I have attached the Criminal Record/Abuse History Verification form required pursuant to Pa.R.C.P. No. 1915.3-1.

WHEREFORE, Plaintiff requests the court to grant (circle all that apply): (shared legal custody) (sole legal custody) (partial physical custody) (primary physical custody) (shared physical custody) (sole physical custody) (supervised physical custody) of the child(ren).

Respectfully submitted,

Date _____

Name

Plaintiff

vs.

Name

Defendant

:
:
:
:
:
:
:
:
:
:
:
:

IN THE COURT OF COMMON PLEAS

WAYNE COUNTY, PENNSYLVANIA

NO. ____-____-DR

.....

VERIFICATION

I, _____, Plaintiff, do hereby affirm that the facts contained in the foregoing Complaint for Custody are true and correct to the best of my knowledge, information and belief. I affirm that there are no outstanding custody matters concerning the minor child(ren) in any other jurisdiction. I understand that false statements made herein are subject to the penalties of 18 Pa.C.S.A. Section 4904 relating to unsworn falsification to authorities.

Date _____

Plaintiff