

**TYPE OR HAND PRINT NEATLY, USING BLACK INK ONLY**

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA

AT \_\_\_\_\_

\_\_\_\_\_ )  
 )  
 \_\_\_\_\_ )  
 Plaintiff, )  
 v. )  
 )  
 \_\_\_\_\_ )  
 Defendant. )

CASE NO. \_\_\_\_\_

**COMPLAINT FOR CUSTODY OF MINOR CHILDREN**

There is an open Child-in-Need-of-Aid Case.  
Court Location: \_\_\_\_\_. Case number (if known): \_\_\_\_\_.

**1. Parent Information**

**NOTE:** *If, for any reason, you do not want the other parent to know your current address or employer, you need not provide that information. However, you **must** provide a mailing address that will allow the court and the other parent to mail required documents to you. That address may be in care of another person as long as you will receive all papers sent to you.*

**Biological Father:**

Full name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Residence address (if different): \_\_\_\_\_

Daytime phone number: \_\_\_\_\_

Most recent employer: \_\_\_\_\_

Dates of employment: \_\_\_\_\_

Employer's address: \_\_\_\_\_

Is this person listed as the father on the children's birth certificates?  Yes  No  
*(If no and the defendant answers denying paternity, you must first establish that this person is the father of the children. See page 10 of the instructions for information about how to do this.)*

**Biological Mother:**

Full name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Residence address (if different): \_\_\_\_\_

Daytime phone number: \_\_\_\_\_

Most recent employer: \_\_\_\_\_

Dates of employment: \_\_\_\_\_

Employer's address: \_\_\_\_\_

Is this person listed as the mother on the children's birth certificates?  Yes  No

2. **The Children.** The defendant and I are the biological parents of the following children (if the mother is pregnant, include the unborn child if you and defendant are the biological parents):

Full Name of Child	Date of Birth (or expected date)	Who does child live with? (mother or father or both)	Was mother married to anyone when she became pregnant with this child? (If yes, list name of husband)

3. **Court Jurisdiction.** This court has the authority to decide the custody of the minor children as shown on the Child Custody Jurisdiction Affidavit (form DR-150) I am filing with this complaint.

4. **Other Custody Orders.**

No custody order involving these children has ever been issued in Alaska or in another state or country.

The following custody orders have been issued involving these children (include domestic violence orders and tribal court orders):

Court Location (City and State)	Case Number	Date of Order	Still in Effect? (Yes or No)

5. **Marital History.**

The defendant and I are not now married to each other and:

have never been married to each other.

were previously married to each other, but the children listed above were conceived or born after a decree of divorce or dissolution was entered.

Divorce or Dissolution Decree Information:

Location of Court (City and State): \_\_\_\_\_

Case Number: \_\_\_\_\_

Date of Decree: \_\_\_\_\_

6. **Legal Custody.** (Before completing this section, read page 7 of the Instructions for an explanation of these terms.)

Because it is in the best interests of the children, I request that I be awarded

sole legal custody       shared legal custody

7. **Physical Custody.** (Before completing this section, read pages 7-8 of the Instructions for an explanation of these terms.)

Because it is in the best interests of the children, I request that I be awarded

Primary Physical Custody. (Children will reside with me more than 70% of the year.)

Shared Physical Custody. (Children will reside with each parent for a specified period of at least 30% of the year.)

I propose the following shared physical custody schedule (Explain when each parent will have physical custody of the children. If either parent is planning a move to another community in the near future, you should explain how shared custody will be continued.):

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Divided Physical Custody       Hybrid Physical Custody.

I propose the following custody arrangement:

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8. **Visitation.**

I request that the court grant the defendant the right to the following schedule of visitation with the children:

Summer Vacation:

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Holidays & Birthdays:

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Weekends:

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Other:

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I am concerned about my safety or the safety of the children when with the other parent. Therefore, I request that visitation be restricted as follows:

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9. **Child Support.** I request that child support be ordered in accordance with Civil Rule 90.3. My child support guidelines affidavit (form DR-305) is attached.

a. Do you request that child support for each child continue for up to a year after the child turns 18?  Yes  No

*(Note: This support is allowed only if the child is 18 years old and (1) unmarried, (2) actively pursuing a high school diploma or equivalent level of training, and (3) living as a dependant with a parent.)*

b. Do you request the assistance of the Child Support Enforcement Division (CSED) to enforce the child support order and keep records of the payments?

Yes  No

*(If yes, fill out form DR-315 and file it with this complaint.)*

c. **Income Withholding.** *(The court must order immediate income withholding from the person ordered to pay child support and order the support paid through the Child Support Enforcement Division (CSED) unless one of the three exceptions authorized by Alaska Statute 25.27.062(m) applies. For an explanation of those exceptions, see form DR-10, page 15, available at the court.)*

Is there a reason why the court should not order immediate income withholding?

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10. **Permanent Fund Dividend.** I request that the court designate \_\_\_\_\_ as the parent who is authorized to apply for the children's Alaska Permanent Fund Dividends while they are minors.

BASED ON THE ABOVE, I ask the court to grant the relief requested in this complaint and any other relief appropriate under the circumstances.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Plaintiff's Signature

**IMPORTANT NOTICE:** *You must keep the court advised of any change in address or daytime phone number until this case is closed.*

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State ZIP

\_\_\_\_\_  
Daytime Telephone

\_\_\_\_\_  
Email Address\*

\* I authorize the court to email me court documents in this case to the email address above.

**Note to Defendant**  
**Forms and instructions about the procedure for answering this complaint are available at the court. Ask for the DR-440 Answer Packet.**