

**IN THE DISTRICT COURT IN AND FOR THE COUNTY OF TULSA  
STATE OF OKLAHOMA**

\_\_\_\_\_, )  
 Petitioner / Plaintiff, )  
 vs. ) Case No. \_\_\_\_\_  
 )  
 \_\_\_\_\_, )  
 Respondent / Defendant, )

**UNIFORM CHILD CUSTODY JURISDICTION  
AND ENFORCEMENT ACT (UCCJEA) AFFIDAVIT**

I, \_\_\_\_\_, being sworn, certify that the following statements are true:  
*{ full legal name }*

- The number of minor child(ren) subject to this proceeding is \_\_\_\_\_.  
 The name, place of birth, birth date, and sex of each child; the present address, periods of residence, and places where each child has lived **within the past five (5) years**; and the name, present address, and relationship to the child of each person with whom the child has lived during that time are:

THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # : \_\_\_\_\_

Child's Full Legal Name: \_\_\_\_\_  
 Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

**Child's Residence for the past 5 years:**

Dates (From/To)	Address (including city and state) where child lived	Name and present address of person child lived with	Relationship to child

THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # : \_\_\_\_\_

Child's Full Legal Name: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

**Child's Residence for the past 5 years:**

<b>Dates (From/To)</b>	<b>Address (including city and state) where child lived</b>	<b>Name and present address of person child lived with</b>	<b>Relationship to child</b>

THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # : \_\_\_\_\_

Child's Full Legal Name: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

**Child's Residence for the past 5 years:**

<b>Dates (From/To)</b>	<b>Address (including city and state) where child lived</b>	<b>Name and present address of person child lived with</b>	<b>Relationship to child</b>

**2. Participation in custody proceeding(s):**

[  one only]

\_\_\_\_\_ **I HAVE NOT** participated as a party or witness or in any capacity in any other proceeding, in this or any other state, concerning the custody of or visitation with a child subject to this proceeding.

\_\_\_\_\_ **I HAVE** participated as a party or witness or in any capacity in any other proceeding, in this or any other state, concerning the custody of or visitation with a child subject to this proceeding.

Explain:

- a. Name of each child: \_\_\_\_\_
- b. Type of proceeding: \_\_\_\_\_
- c. Court and state: \_\_\_\_\_
- d. Case Number: \_\_\_\_\_
- e. Date of court order or judgment (if any): \_\_\_\_\_

**3. Information about custody proceeding(s):**

[  one only]

\_\_\_\_\_ **I HAVE NO INFORMATION** of any custody or visitation proceeding pending in a court of this or any other state concerning a child subject to this proceeding.

\_\_\_\_\_ **I HAVE THE FOLLOWING INFORMATION** concerning a custody or visitation proceeding pending in a court of this or another state concerning a child subject to this proceeding, other than set out in item 2.

Explain:

- a. Name of each child: \_\_\_\_\_
- b. Type of proceeding: \_\_\_\_\_
- c. Court and state: \_\_\_\_\_
- d. Case Number: \_\_\_\_\_
- e. Date of court order or judgment (if any): \_\_\_\_\_

**4. Knowledge of any other proceeding(s):**

[  one only]

\_\_\_\_\_ **I HAVE NO KNOWLEDGE** of any proceeding that could affect the current proceeding, including proceedings for enforcement and proceedings relating to domestic violence, protective orders, termination of parental rights, and adoptions.

\_\_\_\_\_ **I HAVE KNOWLEDGE** of a proceeding that could affect the current proceeding, including proceedings for enforcement and proceedings relating to domestic violence, protective orders, termination of parental rights, and adoptions.

Explain:

- a. Name of each child: \_\_\_\_\_
- b. Type of proceeding: \_\_\_\_\_
- c. Court and state: \_\_\_\_\_
- d. Case Number: \_\_\_\_\_
- e. Date of court order or judgment (if any): \_\_\_\_\_

**5. Persons not a party to this proceeding:**

[  one only]

\_\_\_\_\_ **I DO NOT KNOW OF ANY PERSON** not a party to this proceeding who has physical custody or claims to have legal custody or physical custody of, or visitation rights with respect to any child subject to this proceeding.

\_\_\_\_\_ **I KNOW THAT THE FOLLOWING NAMED PERSON(S)** not a party to this proceeding has (have) physical custody or claim(s) to have legal custody or visitation rights with respect to any child subject to this proceeding:

a. Name and address of person: \_\_\_\_\_

( ) has physical custody ( ) claims custody rights ( ) claims visitation rights.

Name of each child: \_\_\_\_\_

b. Name and address of person: \_\_\_\_\_

( ) has physical custody ( ) claims custody rights ( ) claims visitation rights.

Name of each child: \_\_\_\_\_

c. Name and address of person: \_\_\_\_\_

( ) has physical custody ( ) claims custody rights ( ) claims visitation rights.

Name of each child: \_\_\_\_\_

**6. Knowledge of prior child support proceedings:**

[  one only]

\_\_\_\_\_ The child(ren) described in this affidavit are NOT subject to existing child support order(s) in this or any state or territory.

\_\_\_\_\_ The child(ren) described in this affidavit are subject to the following existing child support order(s):

a. Name of each child: \_\_\_\_\_

b. Type of proceeding: \_\_\_\_\_

c. Court and state: \_\_\_\_\_

d. Date of court order/judgment (if any): \_\_\_\_\_

e. Amount of child support paid and by whom: \_\_\_\_\_

7. **I acknowledge that I have a continuing duty to advise this Court of any custody, visitation, child support, or guardianship proceeding (including dissolution of marriage, separate maintenance, child neglect, or dependency) concerning the child(ren) in this state or any other state about which information is obtained during this proceeding.**

**I declare under penalty of perjury that the foregoing Declaration Under the Uniform Child Custody Jurisdiction and Enforcement Act, including my attachments, is true and correct and that this declaration is executed on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at (Place:) \_\_\_\_\_**

\_\_\_\_\_  
Signature of Declarant

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ ) ss.

Sworn to or affirmed and signed before me on \_\_\_\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

Name, Bar #, Address and Telephone of:

Attorney for Declarant:

\_\_\_\_\_ Bar No. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_