

The Family Court of the State of Delaware

In and For New Castle County Kent County Sussex County

CUSTODY, VISITATION, AND GUARDIANSHIP DISCLOSURE REPORT

Name: Anne C. Smith
 Relationship to the Child (ren) Mother
 Date of Birth: 7/13/1991
 Address: 490 Pine Street
Dover, DE 19901

File Number: CN17-99999
 Petition Number: 01-42301
 Home Phone Number: (302) 333-3333
 Work Phone Number: (302) 222-2222
 Cell Phone Number: (302) 111-1111

Names and dates of birth of any child(ren) involved in this proceeding:

- | | |
|---|---------------------|
| 1. <u>Douglas A. Harding</u> DOB: <u>10/14/2012</u> | 4. _____ DOB: _____ |
| 2. _____ DOB: _____ | 5. _____ DOB: _____ |
| 3. _____ DOB: _____ | 6. _____ DOB: _____ |

Names and dates of birth of all persons living in your household:

- | | |
|---|--|
| 1. <u>Nicole C. Smith</u> DOB: <u>1/14/1991</u> | Relationship to Child (ren): <u>Aunt</u> |
| 2. _____ DOB: _____ | Relationship to Child (ren): _____ |
| 3. _____ DOB: _____ | Relationship to Child (ren): _____ |
| 4. _____ DOB: _____ | Relationship to Child (ren): _____ |
| 5. _____ DOB: _____ | Relationship to Child (ren): _____ |
| 6. _____ DOB: _____ | Relationship to Child (ren): _____ |

1. What contact schedule do you have now with the child(ren) noting how often the child(ren) live(s) with you or visit(s) with you? The children are in my household on average 8 overnights a month.

2. This schedule is by: court order or by agreement

3. What contact schedule are you requesting for yourself with the child(ren)?

- Primary residency, with visitation with the other party **OR**
 Shared Placement
 Visitation, with primary residency with the other party

If you want primary residency, what visitation schedule do you want the visiting party to have with the child(ren)?
In a safe environment John D. Smith may have him on the weekends or as the court deems fit.

If you want shared residency, how would you like to share the time with the other party?
N/A

4. **Legal custody** refers to a parent's right to make decisions regarding the child, not where the child primarily lives. **Joint legal custody** means that the parents share the duties and responsibilities of raising the child and are expected to share information and decide major issues about the child together. **Sole legal custody** means that

one parent has decision-making authority although both parents have access to the child and the right to request information about the child.

- Requesting Joint Legal Custody**
- Requesting Sole Legal Custody**

If you are requesting sole legal custody, explain why.

N/A

5. Where do you work and what is your work schedule? XYZ Corporation
9:00 AM to 5:00 PM, Monday-Friday
6. How many miles do you live from the other party? 15
7. How many miles do you live from the child(ren)'s school? 5
8. In which school district do you live? Capital
9. How many miles does the other party live from the child(ren)'s school? 20
10. In what school district does the other party live? Smyrna
11. Do you have any history of drug or alcohol abuse? Yes No
If yes, describe: _____
12. Does the other party have any history of drug or alcohol abuse? Yes No
If yes, describe: Previously marijuana, not 100% certain if he still does.
13. Do you have any concerns about your physical or mental health? Yes No
If yes, describe concerns: _____
14. Do you have any concerns about the physical or mental health of the child(ren)? Yes No
If yes, describe concerns: I just want to make sure wherever Douglas will be it's a safe environment without any dangerous conditions.
15. Do you have any concerns about the physical or mental health of the other party? Yes No
If yes, describe concerns: _____
16. List all of your criminal convictions, including DUIs. The Court is required to check criminal histories of all parties and members of the household: None.
17. List all criminal convictions of the other party of which you are aware, including DUIs:
Marijuana possession, speeding.
18. Do you intend to offer evidence of domestic violence at trial?
Not at this time.
19. Have you or the other party ever been investigated by the Division of Family Services or a child welfare agency in another state? Yes No

If yes, explain: _____

20. Do you or the other party have a finding of child abuse or neglect by the Division of Family Services or a child welfare agency in another state? Yes No

If yes, explain: _____

21. Has the child(ren) ever lived with anyone other than you or the other party? Yes No
If yes, with whom did the child(ren) live and what were the dates: Maternal grandmother June-August 2012

Any other information that you believe is relevant to this proceeding: I have the financial ability, maturity, and help to be able to care for Douglas whereas the opposing party in my belief is not quite there yet.

There is a duty to supplement and/or update this report. As such, parties are free to amend without leave of the Court.

<u>March 17, 2014</u>	<u>Anne C. Smith</u>	<u>Anne C. Smith</u>
Date	Print Name	Signature
Only sign this form in the presence of a notary or court staff	<u>Joseph Attorney</u>	<u>Joseph Attorney</u>
	Print Name	Attorney Signature

Sworn to and subscribed before me this 17 day of March, 2014

Ms. Marianne Notary 03/17/2014
Notary / Clerk of Court Date

This Affidavit of Exchange must be signed in the presence of a notary or court staff

Affidavit of Exchange

This Disclosure Report must be exchanged with the other party. Please check one of the following boxes indicating how this exchange occurred.

- I affirm that this Custody, Visitation, and Guardianship Disclosure Report was filed with my petition and was therefore served by the Court upon the other party.
- I affirm that this Custody, Visitation, and Guardianship Disclosure Report was filed with the Court after the filing of the petition. I further affirm that a true and correct copy of this Disclosure Report was placed in the U.S. mail on the _____ day of _____, _____ and sent to the other party or attorney at the address listed on the petition, first class postage pre-paid.
- I affirm that this Custody, Visitation, and Guardianship Disclosure Report was brought to the Family Court mediation conference on the _____ day of _____, _____ with a true and correct copy given to the other party.

<u>March 17, 2014</u>	<u>Anne C. Smith</u>	<u>Anne C. Smith</u>
Date	Print Name	Signature
	<u>Joseph Attorney</u>	<u>Joseph Attorney</u>
	Attorney Print Name	Attorney Signature

Sworn to and subscribed before me this 17 day of March, 2014

Ms. Marianne Notary 3/17/14
Notary / Clerk of Court Date