STATE OF NORTH CAROLINA COUNTY	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-9 *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 From	To Present	Address	Name of Person Lived With	Present Address of Person

I further say that: *(Check those that apply.)*
[] I have participated in litigation concerning the custody of the above named child.

Capacity as Participant	*Date of Action*	*Name and Address of Court*

Details

[] I have information of a custody proceeding concerning the above named child pending in a court in this or another state.

Name and Address of Court	*Details*

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

Name and Address of Person	[] Physical Custody [] Claimed Custody [] Visitation Rights

SWORN AND SUBSCRIBED TO BEFORE ME

Date	*Signature*

Title of person Authorized to Administer Oaths

Date Commission Expires:

Date

Signature of Affiant

Relationship to Above Named Child

AOC-CV-609

REV. 9/93

ATTACH ADDITIONAL PAGES IF NEEDED AS TO RESIDENCE ADDRESSES OF MINOR CHILD