

## **Absent Parent Affidavit**

I,	
Residing at	
Being duly sworn, depose and say as follows:	
1. I do / do not (check one) know the whe	reabouts of the child's (children's) absent parent.
The child's (children's) name(s) is (are):	
1	2
3	4
The absent parent's name is:	
He/She resides at:	
The telephone number is:	
(Complete and circle either 2 or 3, whichever applies)	
2. The absent parent contributes monetarily to my	y household.
The amount contributed is \$	per
3. The absent parent does not contribute moneta	rily to my household.
Name of applicant (please print):	
Signature:	
State of:	
County of:	
Sworn to me before this day of	, 20
Notary Public	Date