

Superior Court of Washington, County of _____

In re parentage:

Petitioner *(person who started this case)*:

And Respondents
(other people who signed the Acknowledgment or Denial; other alleged parents (if any)):

Children over age 2:

No. _____

Response to Petition to Challenge Paternity
Acknowledgment or Denial
(RSP)

**Response to Petition to Challenge
Paternity Acknowledgment or Denial**

1. Your response

Look at each section of the *Petition*. Check below to say if you agree or disagree with what the other party said in each section, or say if you don't know because you don't have enough information. (If you disagree with any part of a section, check "I disagree.") List your reasons for disagreeing on page 2.

Section in the Petition	Your response (<i>check one</i>)		
1. <i>Paternity Acknowledgment or Denial</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
2. <i>Parties to this case</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
3. <i>Correct County (Venue)</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
4. <i>Personal Jurisdiction</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
5. <i>Effective Date</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
6. <i>Challenge Deadline</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know

Section in the Petition	Your response (<i>check one</i>)		
7. Reason/s for Challenge	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
8. Genetic Tests	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
9. Child's name change	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
10. Child's Home/s	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
11. Other people with a legal right to spend time with this child	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
12. Other court cases involving this child	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
13. Jurisdiction over this child	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
14. Parenting Plan or Residential Schedule	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
15. Child Support	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
16. Protection Order	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
17. Restraining Order	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know

If you checked "I disagree" for any of the sections, list your reasons here:

Section #: _____ Reasons: _____

Section #: _____ Reasons: _____

(If you need more space, you may add more pages to this Response. Number, date and sign each page that you add.)

2. Other Possible Parents

- Does not apply.
- The following person/s may be the child's parent (name/s): _____

Important! Naming someone as a possible parent here does not make that person a party to this case. Further action must be taken to join that person as a party.

3. Protection Order

Do you want the court to issue an Order for Protection as part of the final orders in this case?

- No.** I do not want an Order for Protection
- Yes.** (You must file a Petition for Order for Protection, form DV-1.015 for domestic violence, or form UHST-02.0200 for harassment. You may file your Petition for Order for Protection using the same case number assigned to this case.)

Important! If you need protection **now**, ask the court clerk about getting a Temporary Order for Protection.

- There already is an Order for Protection between (name): _____ and me.** (Describe):
- Court that issued the order: _____
- Case number: _____
- Expiration date: _____

4. Restraining order

Do you want the court to issue a Restraining Order as part of the final orders in this case?

- No.** (Skip to **5**.)
- Yes.** Check the type of orders you want:
- Do not disturb** – Order (name/s) _____ not to disturb my peace or the peace of any child listed in the *Petition*.
- Stay away** – Order (name/s) _____:
- Not knowingly to go or stay within _____ feet of my home, workplace, or school, or the daycare or school of any child listed in the *Petition*.
- To stay away from my home, workplace, or school, and the daycare or school of any child listed in the *Petition*.

- Do not hurt or threaten** – Order (*name/s*) _____:
- Not to assault, harass, stalk or molest me or any child listed in the *Petition*; and
 - Not to use, try to use, or threaten to use physical force against me or the children that would reasonably be expected to cause bodily injury.

Warning! If the court makes this order, the court must consider if weapons restrictions are required by state law; federal law may also prohibit the Restrained Person from possessing firearms or ammunition.

- Prohibit weapons and order surrender** – Order (*name/s*) _____:
- Not to possess or obtain any firearms, other dangerous weapons, or concealed pistol license until the Order ends, and
 - To surrender any firearms, other dangerous weapons, and any concealed pistol license that he/she possesses to (*check one*): the police chief or sheriff. his/her lawyer. other person (*name*): _____.

- Other restraining orders:** _____

Important! If you want a restraining order **now**, you must file a Motion for Temporary Family Law Order and Restraining Order (form FL Parentage 323) or a Motion for Immediate Restraining Order (Ex Parte) (form FL Parentage 321).

5. Requests

I ask the court to (*check all that apply*):

- Deny** the *Petition*. The *Paternity Acknowledgment* and *Denial*, if any, are still valid because (*check all that apply*):

the *Petition* was first filed or served after the deadline.

other reason (*explain*): _____

- Order** Petitioner to pay my attorney fees and costs.

- Approve** the *Petition*. (*Check all that apply*):

Acknowledgment / Denial of Paternity

Invalidate the *Paternity Acknowledgment* (and cancel any related *Denial of Paternity*).

Invalidate the *Denial of Paternity* (and cancel the related *Paternity Acknowledgment*).

Decide Parentage

Order genetic testing of all possible parents listed in the *Petition* and decide who the legal parents are based on the results.

Declare that (*name*): _____ **is** the legal parent of this child.

Declare that (*name*): _____ **is not** the legal parent of this child and owes no further duty of support to the child or to any person or state on behalf of the child.

Change the child's birth certificate to list the parents as requested above.

and to change the child's name to: _____.

Parenting Plan / Residential Schedule

Approve a *Parenting Plan* or *Residential Schedule*.

Child Support

End (*name's*): _____ obligation to pay child support for the child.

Approve a *Child Support Order*

Protection / Restraining Order

Approve an *Order for Protection*.

Approve a *Restraining Order*.

Fees / Other

Order who should pay for court costs, genetic testing, guardian ad litem, lawyer fees, and other reasonable fees.

Other (*specify*): _____

Respondent fills out below:

I declare under penalty of perjury under the laws of the state of Washington that the facts I have provided on this form (including any attachments) are true.

I have attached (*number*): _____ pages.

Signed at (*city and state*): _____ Date: _____

▶ _____
Respondent signs here *Print name*

I agree to accept legal papers for this case at (*check one*):

my lawyer's address, listed below.

the following address (*this does not have to be your home address*):

street address or PO box *city* *state* *zip*

(Optional) email: _____

If this address changes before the case ends, you must notify all parties and the court clerk in writing. You may use the Notice of Address Change form (FL All Family 120).

Important! You must fill out and file a *Confidential Information* form (FL All Family 001) with the court clerk.

Lawyer (if any) fills out below:

▶ _____
Lawyer signs here *Print name and WSBA No.* *Date*

Lawyer's street address or PO box *city* *state* *zip*

Email (*if applicable*): _____