

CUSTODIAL AFFIDAVIT
STATE OF NEW YORK } ss:
COUNTY OF _____)

_____, being duly sworn, deposes and says:
(Name of Custodian)

1. I reside at _____
(Full Address of Custodian)

2. _____ is my _____
(Full Name of Child) (Child's Relationship to Custodian)
and he/she has been living with me since _____
(Date)

3. _____ intends to reside with me for _____
(Child's Name) (Length of Time)

4. Give statement naming the individual who will have custody and control of the child. _____

5. Give the reasons the child is living with the person in custodial relationship.

6. Describe any other location (s) where the child lives. Indicate the length of time the child is at the other address and provide an explanation. If the child does not live at any other address, so indicate. _____

7. Please furnish a statement establishing who provides the child with food, clothing and all other necessities. _____

8. As the person in custodial relationship, I state that I will assume full responsibility for all matters to the child's education and medical care.

(Signature of Custodian)

Sworn to before me this _____ day of _____, 20_____

(Notary Public)