

vs.

ANSWER TO PATERNITY COMPLAINT

I, \_\_\_\_\_ DOB: \_\_\_\_\_ answer  
the paternity complaint regarding the child \_\_\_\_\_ ,  
DOB: \_\_\_\_\_ , as follows:

PLEASE CHECK ONE

I deny I am the father of \_\_\_\_\_ and  
would like to undergo DNA testing. I understand that if I am adjudicated the father  
I may be ordered to repay the costs of the DNA testing. I have completed the  
affidavit required to request DNA testing and have enclosed the affidavit along  
with my answer.

I admit I am the father of \_\_\_\_\_. I  
understand that by admitting I am the father of the child, my name will be added  
to the child's birth certificate as his / her father. I understand that by admitting  
paternity, I am waiving the right to have DNA testing, the right to a hearing or trial  
and the right to cross examine witnesses. I understand I may be ordered by the  
Court to pay child support and to provide medical coverage for the child.

Other - Write in your own words your answer to this Paternity Complaint or any other  
information you may have in addition to the answers previously listed:

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ENTRY OF APPEARANCE

I hereby enter my appearance as a self represented litigant and agree to accept future service by regular mail at the address listed herein. I further agree to keep both the Office of Child Support Services, located at 77 Dorrance Street, Providence, RI, 02903 and Rhode Island Family Court, located at One Dorrance Plaza, Providence, RI 02903 apprised of my current address pursuant to RI General Laws § 15-5-16.2 (1-3). If I fail to comply with the aforesaid terms and also to cooperate with the Office of Child Support Services, I understand that I may be defaulted and found to be the father of the child(ren) listed herein.

PRINTED NAME: \_\_\_\_\_ D.O.B. \_\_\_\_\_

PLACE OF BIRTH: \_\_\_\_\_ SSN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

CERTIFICATION

I hereby certify that I mailed / hand delivered a copy of the answer to the Rhode Island Family Court located at One Dorrance Plaza, Providence, RI, 02903 as well as the Department of Human Services - Office of Child Support Services, at 77 Dorrance Street, Providence, Rhode Island, 02903 on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ .

\_\_\_\_\_  
SIGNATURE