

IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA
CIVIL DIVISION

vs
Plaintiffs)
) NO. -FC-
) CUSTODY
Defendant)

COUNTERCLAIM FOR CUSTODY

1. On _____, Plaintiff filed a Complaint for Custody.

2. Plaintiff, _____,
currently resides at _____

3. Plaintiff, _____,
currently resides at _____

4. Defendant, _____,

Defendant's address is confidential

No

Yes (If yes, you must check one)

Address Confidentiality Program ACP code: _____

Final PFA Order Case Number: _____

5. Defendant seeks primary/partial custody of the minor child(ren):

(Please use child/ren's initials)

_____ Year of Birth _____

_____ Year of Birth _____

_____ Year of Birth _____

6. The child(ren) (has/have) resided with Mother Father for _____ Months/years.

7. The current custodial agreement is:

a. Primary custody in Mother Father.

b. Partial physical custody in Mother Father as follows:

8. The Petitioner currently resides with the following adult persons:

Name

Date of Birth

9. The Respondent currently resides with the following adult persons:

Name

Date of Birth

10. The Respondent currently resides with the following adult persons:

Name

Date of Birth

11. Defendant seeks the following relief:

12 The best interests of the child(ren) will be served by granting the relief requested for the following reasons:

WHEREFORE, Defendant requests the Court grant the relief requested.

Print Name

Signature

Phone Number

I verify that the statements made in this pleading are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. Sec. 4904 relating to unsworn falsification to authorities.

Date

Petitioner

CERTIFICATE OF COMPLIANCE

I certify that this filing complies with the provisions of the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts* that require filing confidential information and documents differently than non-confidential information and documents.

Submitted by: _____

Signature: _____

Name: _____

Attorney No. (if applicable): _____