

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

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

**COUNTERCLAIM FOR CUSTODY**

1. On \_\_\_\_\_ , Plaintiff filed a Complaint for Custody.  
2. Plaintiff, \_\_\_\_\_ ,  
currently resides at \_\_\_\_\_

3. Defendant, \_\_\_\_\_ ,  
Defendant's address is confidential  
 No

Yes (If yes, you must check one)  
 Address Confidentiality Program ACP code: \_\_\_\_\_

Final PFA Order Case Number: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. 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 \_\_\_\_\_

5. The child(ren) (has/have) resided with  Mother  Father for \_\_\_\_\_ Months/years.

6. The current custodial agreement is:  
a. Primary custody in  Mother  Father.  
b. Partial physical custody in  Mother  Father as follows:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

**Name**

**Date of Birth**

\_\_\_\_\_  
\_\_\_\_\_

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

**Name**

**Date of Birth**

\_\_\_\_\_  
\_\_\_\_\_

9. Defendant seeks the following relief:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. 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.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Attorney No. (if applicable): \_\_\_\_\_