

Neb. Rev. Stat. § 43-2930 (1) states that a Temporary Child Information Affidavit shall be offered as an exhibit by each party to a contested proceeding for a temporary order relating to custody, etc. The affidavit may include items specified by statute, including those listed below; and others as necessary.

_____, Case No. CI _____
Plaintiff, (case number assigned by clerk of court)
vs.

_____,
Defendant.

**TEMPORARY
CHILD INFORMATION
AFFIDAVIT**

I, _____, being first duly sworn,
(your full name)
state as follows:

1. I am the _____ in this action.
(plaintiff or defendant)

2. My spouse The other parent and I have _____ child(ren).
(check one)

Their name(s) and year(s) of birth are:

_____	_____
(full name of child)	(child's year of birth)
_____	_____
(full name of child)	(child's year of birth)
_____	_____
(full name of child)	(child's year of birth)
_____	_____
(full name of child)	(child's year of birth)

3. Following are the names and addresses of all adults with whom the above child(ren) has/have lived with for the past twelve (12) months:

Name of Adult	Address	Name of Child	Dates of Residence
_____	_____	_____	_____
(name of adult)	(adult's address)	(name of child living with adult)	(from mo./yr. to mo./yr.)
_____	_____	_____	_____
(name of adult)	(adult's address)	(name of child living with adult)	(from mo./yr. to mo./yr.)
_____	_____	_____	_____
(name of adult)	(adult's address)	(name of child living with adult)	(from mo./yr. to mo./yr.)
_____	_____	_____	_____
(name of adult)	(adult's address)	(name of child living with adult)	(from mo./yr. to mo./yr.)

4. During the past 12 months, I have provided for the daily needs of the child(ren) in the following ways:

(list of daily needs you have provided for the child(ren) in the last 12 months)

5. During the past 12 months, my spouse the other parent has provided for
(check one)

the daily needs of the child(ren) in the following ways:

(list of daily needs your spouse/the other parent has provided for the child(ren) in the last 12 months)

6. During the past 12 months, my work schedule has been as follows:

(describe your work schedule over the past 12 months)

7. During the past 12 months, my child(ren)'s child care schedule has been as follows:

(describe your child(ren)'s child care schedule over the past 12 months)

8. Check the box that applies:

At this time, I do not expect a change to my work schedule.

OR

At this time, I expect the following change(s) to my work schedule:

(list expected change(s) to your work schedule)

9. Check the box that applies:

At this time, I do not expect a change to my child(ren)'s child care schedule.

OR

At this time, I expect the following change(s) to my child(ren)'s child care schedule:

(list expected change(s) to your child(ren)'s child care schedule)

10. Check the box that applies:

The child(ren) is/are not involved in any school-related or extracurricular activities.

OR

The child(ren) is/are involved in the following school-related or extracurricular activities:

Activity	Party Responsible for Transportation
_____	_____
(activity)	(party responsible for transportation)
_____	_____
(activity)	(party responsible for transportation)
_____	_____
(activity)	(party responsible for transportation)
_____	_____
(activity)	(party responsible for transportation)

11. Check the box that applies:

There are no circumstances of child abuse or neglect, domestic abuse, or unresolved conflict with my spouse the other parent

(check one)

that would justify any limitation on custody, parenting time, visitation, or other access to the child(ren).

OR

There are circumstances of child abuse or neglect, domestic abuse, or unresolved conflict with my spouse the other parent that would (check one) justify a limitation on custody, parenting time, visitation, or other access to the child(ren). Following are the details (including details of any previously filed restraining orders, protection orders, or criminal no-contact orders):

(list circumstances justifying limitation)

SIGN IN FRONT OF NOTARY PUBLIC

I hereby swear, or affirm, under penalty of perjury, that the above information is true.

Signature: _____ Date: _____

Printed Name: _____

Street Address/P.O. Box:

City/State/ZIP Code: _____

Telephone Number:_____

Email address: _____

State of _____)
 _____) ss.

County of _____)

This document was acknowledged before me by _____,
this _____ day of _____, 20____.

____ Notary commission expires: _____

Signature of Judge/Clerk of the Court/Notary Public

Title: _____ Serial Number (if any): _____

CERTIFICATE OF SERVICE

I hereby certify that on the _____ day of _____, _____, a true copy of the foregoing Temporary Child Information Affidavit was sent by first-class mail, postage prepaid, to the other party at

(spouse's address, including street address, city, state, and ZIP code)

(your name)