

You must use black ink to fill out this form.

B. Each parent has the following capability and desire to meet these needs: *(Describe how each of you can or cannot meet your child(ren)'s needs.)*

Mother: _____

Father: _____

C. The preference of the child is described as follows: *(There is no absolute rule on when a child is of sufficient age and capacity to form a preference, it depends on each child. You can explain your thoughts on this issue here.)*

D. The love and affection existing between the child(ren) and each parent is described as follows: *(Describe for you and how you think it is with the other parent.)*

Mother: _____

Father: _____

E. The child(ren)'s living arrangements have been as follows, and I believe those arrangements should stay the same or change for the following reasons: *(The court will consider the length of time the child(ren) has(have) lived in a stable, satisfactory environment and the desirability of maintaining continuity.)*

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F. I think that each parent has the following desire and ability to allow an open and loving frequent relationship between the child and the other parent:
(Describe for you and how you think it is for the other parent.)

Mother: _____

Father: _____

G. There has has not been domestic abuse, child abuse, or child neglect in the proposed custodial household or a history of violence between the parents. *(If you answered "yes," explain briefly what has happened and how the Custody and Visitation Plan addresses this issue.)*

H. There has has not been substance abuse by either parent or other members of the household that directly affects the emotional or physical well-being of the child. *(If you answered "yes," explain briefly what has happened and how the Custody and Visitation Plan addresses this issue.)*

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I. I would like the court to consider the following additional comments and issues when deciding what is in our child(ren)'s best interests:

_____ more pages are attached and incorporated by reference.

Your Signature (In blue ink if possible)

Subscribed and sworn to or affirmed before me at _____,
Alaska on _____, _____
Date Name of City, Town or Village

(SEAL)

Notary Public or other person authorized to administer oaths.
My commission expires on _____

I certify that on _____ a copy of this *Affidavit and Memorandum* was mailed hand delivered to:

Opposing Party _____

Opposing Lawyer _____

CSSD/AG CI Other _____

Your signature: _____