



**MOTION FOR
TEMPORARY CONTACT
DE FACTO PARENTAGE**
G. L. c. 209C, § 25 (h)

Docket Number

**Massachusetts Trial Court
Probate and Family Court**

Plaintiff

v.

Defendant 1.

Defendant 2.

Division

I am the Plaintiff in the above action and I request an order for temporary contact with:

Name of Child

☐ by phone.

☐ in person.

☐ other (explain): _____

Reasons for request:

Signature of Attorney or party if not represented

Print Name

(Address)

(Apt, Unit, No. etc.)

(City/Town)

(State)

(Zip)

Primary Phone #: _____

e-mail address: _____

BBO No., if applicable: _____

↓ ↓ FOR COURT USE ONLY ↓ ↓

The within Motion is ☐ **ALLOWED** following a determination of Plaintiff's standing as follows: _____

The within Motion is ☐ **DENIED.** _____

Date _____

JUSTICE OF THE PROBATE AND FAMILY COURT

| | |
|---|-----------------------|
| <div>Plaintiff</div> <div>v.</div> <div>Defendant 1. Defendant 2.</div> | <div>Docket No.</div> |
|---|-----------------------|

CERTIFICATE OF SERVICE

I, _____, hereby certify that I served a copy of the above motion upon:

(Name of the other party, address and e-mail
or name, address, and e-mail of the attorney
of record)

(Print name)

☐ Parent/Defendant ☐ Legal Guardian ☐ Legal Custodian

☐ Other party to the proceeding: _____
explain

(Address)

(Apt, Unit, No. etc.)

(City/Town)

(State)

(Zip)

(e-mail)

by ☐ delivery in hand on _____ at _____ ☐ a.m. ☐ p.m.
(date) (time)

☐ first-class mail on _____
(date of mailing)

☐ e-mail to: _____ on _____
(e-mail address) (date)

If you are serving this by e-mail on a self-represented party, you must first receive consent in writing. That consent may be an e-mail.

(Name of the other party, address and e-mail
or name, address, and e-mail of the attorney
of record)

(Print name)

☐ Parent/Defendant ☐ Legal Guardian ☐ Legal Custodian

☐ Other party to the proceeding: _____
explain

(Address)

(Apt, Unit, No. etc.)

(City/Town)

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| | |
|--|------------|
| _____ Plaintiff v. Defendant 1. Defendant 2. | Docket No. |
|--|------------|

(Name of the other party, address and e-mail or name, address, and e-mail of the attorney of record)

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SIGN BELOW

Date: _____ Signature _____