

STATE OF INDIANA)

IN THE ELKHART SUPERIOR COURT 6

COUNTY OF ELKHART)

CASE NO: _____

IN RE: THE PATERNITY OF: _____
Child's Name

Name of the Person Filing

Select One: Mother Father Putative Father

Other _____

And

Name of the Other Person

Select One: Mother Father Putative Father

Other _____

APPEARANCE BY UNREPRESENTED PERSON IN CIVIL CASE

This Appearance Form must be filed on behalf of every party in a civil case.

1. My name is _____ and I am:

Initiating (filing)

Responding (answering)

in this case and I am not represented by an attorney.

2. My contact information for receiving legal service of documents and case information as required by Court Rules is:

Address:

Email address: _____

I will accept service at this email address.

Phone: _____

3. This is a **JP** case type as defined in Indiana Administrative Rule 8(B)(3).

4. There are related cases involving the child(ren):

Yes No

If yes, please indicate the following for related cases:

Case No.: _____ Parties: _____

Case No.: _____ Parties: _____

Case No.: _____ Parties: _____

(Additional cases if needed:)

/s/ _____
Signature

Date

Printed Name

Email Address

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this Appearance to the other person's attorney, or to the other person if they are not represented by an attorney, via:

Registered mail at this address: _____

Certified mail at this address: _____

Sheriff

Other: _____

/s/ _____
Signature

Date