STATE OF INDIANA)		IN THE ELKHART SUPERIOR COU
ELKHART COUNTY)		CASE NO.
IN RE: THE	OF	
		(Child's Name if Required)
Name of Person Filing		
Select One: \square Mother \square Father		
\square Husband \square Wife \square Other:		_
And		
Name of Person Responding		
Select One: ☐ Mother ☐ Father ☐ Husband ☐ Wife ☐ Other:		
□ Husband □ Wife □ Other.		_
PROP	OSED EXI	HIBIT LIST
Comes now		, self-represented, and files a list of proposed
exhibits.		
The proposed exhibits are as follows:		
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Respectfully submitted,		
/s/		
Signature		Date
Printed Name		Email Address

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this document to the they are not represented by an attorney, via:	other person's attorney, or to the other person if
☐ Registered mail at this address:	
☐ Certified mail at this address:	
☐ Sheriff	
☐ E-Service per Trial Rule 86 at this email address:	
☐ Other:	
/s/	
Signature	Date