

10. That (check one)

() I am unable to contact or locate either parent of the child(ren) or other person(s) having legal custody of the child(ren) at this time.

() I made a written request to the child(ren)'s parent(s) or other person(s) having legal custody of the child(ren) on the ____ day of _____, 20____, to regain physical custody of the child(ren), and said custodian has failed to regain custody or such request has been refused.

11. That, at this time, I do/do not (choose one) intend to seek child support from the child(ren)'s parent(s) or legal guardian(s).

12. That granting Petitioner care and custody by abandonment is necessary to provide for the general welfare of the child(ren) and to allow Petitioner to authorize medical, dental, educational, child care and/or other services for the child(ren).

13. That I hereby accept care and custody of the child(ren). I will exercise continuing general supervision of the child(ren).

14. That I am qualified to be granted care and custody by abandonment. I further inform the Court that I am not a minor, incapacitated person or partially incapacitated person. Attached to this petition is a completed Oklahoma Sex Offenders Registration Act Affidavit. There are no conflicts of interest that would preclude or be substantially detrimental to my ability to act in the best interest(s) of the minor child(ren).

WHEREFORE, the Petitioner prays the Court to grant Petitioner care and custody by abandonment and issue Letters of Custody by Abandonment upon the taking of the oath.

Signature of Pro Se Petitioner

Printed Name _____

Address _____

Phone _____

Verification

State of Oklahoma)
) SS.
County of _____)

I, _____, of lawful age, being first duly sworn upon oath depose and state that I am the Petitioner named above; that I have read the foregoing Petition and

understand its contents; that I hereby state that the facts set forth in the foregoing Petition are true and correct to the best of my knowledge and belief.

Signature of Petitioner

Subscribed and sworn to before me this _____ day of _____, 20_____.

Notary Public

My Commission Number is: _____

My Commission Expires: _____