The Family Court of the State of Delaware



In and For  New Castle County  Kent County  Sussex County

**AFFIDAVIT THAT A PARTY’S ADDRESS IS UNKNOWN**

|  |  |
| --- | --- |
| Petitioner | Respondent |
| Name: | Name: |

|  |
| --- |
| File Number |
|  |
| Petition Number |
|  |

|  |  |  |
| --- | --- | --- |
| State of Delaware | | ) |
|  | | ) |
|  | County | ) |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | BE IT REMEMBERED, that on this | |  | day of |  | | | , |  | | , personally |
| appeared before me, a Notary Public for the State and County aforesaid, | | | | | |  | | | | | |
| (“Affiant”), who, being by me duly sworn according to law did depose and say: | | | | | | | | | | | |
| 1. | My name is |  | | | | | | | | | |
| 2. | I do not know the current address or telephone number, nor do I know anyone who could provide me | | | | | | | | | | |
|  | with the current address or telephone number of | | |  | | | | | | . I have | |
|  | contacted his/her: | | | | | | | | | | |
|  | (Please check as appropriate)  Parent  Spouse  Employer  Other: | | | | | |  | | | | |
| 3. | His/Her last known address and telephone number were: | | | | | | | | | | |

|  |
| --- |
| Street Address (including Apt) |
|  |
| P.O. Box Number |
|  |
| City/State/Zip Code |
|  |
| Phone Number | Information as of: (date) |
|  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 4. | I have had no contact with him/her since | |  | . |
|  |  | |  |  |
| 5. | I understand that publication is necessary in this case, and | | | |
|  |  | I am requesting that the Court publish notice of this action on its legal notices website at no cost to me. | | |
|  |  | | | |
|  |  | I am informing the Court that I will be publishing notice of this action in the appropriate newspaper **at my cost** as I believe that the respondent is more likely to see a notice in a newspaper than online. I understand that I will be responsible for filing with the Court the Affidavit of Publication within 30 days of filing this form. I further understand that my failure to do so will result in the petition being dismissed. | | |
|  |  | | | |
| 6. | I understand publication is not permitted in paternity, spousal support, or child support cases. | | | |
| 7. | The information contained herein is true and correct to the best of my knowledge and belief. | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | Affiant | | | | | | | | |
| Sworn to subscribed before me this |  | | | day of | |  | , |  | | | |  | |
|  | | |  | | | | | |  | |  | | |
|  | | Clerk of Court/ Notary Public | | | | | |  | | Date | | |  |