REQUEST FOR ENFORCEMENT OF PARENTING TIME

Your complaint must be submitted within 56 days of the date the alleged violation occurred.

Please note that the Friend of the Court can only enforce parenting time as specifically described in your court order. Agreements between the parties that are not in a court order cannot and will not be enforced by our office.

Failure to complete all sections may result in a denial.

Case #:	Date:
Your Name:	
Address:	Daytime Phone #:
COMPLAINT AGAINST:	Daytime Phone #:
Address:	City/State/Zip:
Child(ren)'s Names and Ages:	
Now comes	and submits this Parenting Time Affidavit as follows:
(print your name)	
According to my court order dated child(ren):	, I was to have parenting time with my
Beginning on: Date:	Time:
Beginning on: Date: Ending on: Date: Explain the events of denied parenting	

Please check your actions:	
	me; at the court ordered exchange location, which is at: ; other:
\Box I <u>DID</u> wait the 30 minutes as required by the Sagina	aw County Friend of the Court Parenting Time Guidelines.
☐ I <u>HAVE</u> been denied parenting time before.	
WHAT ACTION ARE YOU REQUESTING FROM one.)	M THE FRIEND OF THE COURT? (Choose only
☐ Review my complaint and take enforcement action	
☐ Read my complaint and make it part of my file.	
***PLEASE NOTE THAT COMPLAINTS RECE ALLEGED VIOLATION OCCURRED MAY NOT	
DATE SIGNED:	
Your signature (complaining party)	Printed name (complaining party)