

Sample for Reference Purposes Only. Forms have bilingual format for your convenience, but must be completed and filed with the court in English. 表格样本, 仅供参考. 为了提供便利, 表格采用双语格式, 但向法院提交的表格必须用英语填写。

如果此表单包含限制性信息, 请勾选此框。



CIRCUIT COURT FOR
巡回法院

, MARYLAND
马里兰

Located at
位置

City/County

市/县,

Telephone

电话

Case No.

案件编号

Plaintiff/Counter-Defendant 1
原告/反诉被告 1

VS.
诉

Defendant/Counter-Plaintiff 1
被告/反诉原告 1

Street Address
街道地址

Street Address
街道地址

City, State, Zip
市、州、邮编

Telephone
电话

City, State, Zip
市、州、邮编

Telephone
电话

E-mail
电子邮件

E-mail
电子邮件

Plaintiff/Counter-Defendant 2
原告/反诉被告 2

Defendant/Counter-Plaintiff 2
被告/反诉原告 2

Street Address
街道地址

Street Address
街道地址

City, State, Zip
市、州、邮编

Telephone
电话

City, State, Zip
市、州、邮编

Telephone
电话

E-mail
电子邮件

E-mail
电子邮件

COUNTER-CLAIM FOR CUSTODY CHILD SUPPORT

未成年子女 监护 抚养费反诉

(Md. Code, Family Law Art., §§ 1-201 and 5-203, Md. Rule 2-331)

(《马里兰法典》,《家庭法》§ § 1-201 和 5-203,《马里兰州法规第2-331 条》)

If this submission contains Restricted Information (confidential by statute, rule or court order) you must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (form MDJ-008) with this submission, and check the Restricted Information box on this form.

如果此文书包含限制性信息(根据法规、规则或法院命令保密), 您必须根据规则第 20-201.1 条(表格 MDJ-008)随此文书提交有关限制性信息的声明, 并勾选此表格上的限制性信息框。

NOTE: Use this form when a complaint or petition has already been filed against you. If you sign and mail a copy of this form to all other parties, that constitutes service. Visit mdcourts.gov/custody and mdcourts.gov/parentingplans.

注:如果您被起诉, 使用此表格。如果您在本表格上签名并将其副本邮寄给所有其他当事方, 即构成送达。请访问 mdcourts.gov/custody 和 mdcourts.gov/parentingplans。

I/We, _____, state that:
我/我们 _____, 声明:

Your name(s)
您(们)的姓名

1. I am/We are filing a counter-claim to _____
filed against me/us. Name of complaint or petition you are countering

我/我们就我/我们遭到的起诉 _____
提出反诉。 您对其提出反诉的诉讼的名称

2. I am/We are the mother father _____
of the following minor child(ren): Relationship (for example, aunt, grandfather, guardian)

我/我们是以下未成年子女 _____
母亲 父亲 : 关系(例如阿姨/姑妈/伯母/舅妈、祖父/外祖父、监护人)

<u>Name(s)</u> 姓名	<u>Date(s) of birth</u> 出生日期

3. The child(ren) live(s) at _____ with _____
Address

_____ .
Name of person(s) and relationship to child(ren)

未成年子女居住地址 _____ 同住人
地址

_____ .
人员姓名以及与未成年子女的关系

4. The minor child(ren) has/have lived in Maryland for at least six (6) months yes no. In the past five (5) years
the minor child(ren) has/have lived in the following places with the following person(s):

未成年子女在马里兰州已经生活了至少六(6)个月 是 否。在过去五(5)年里,未成年子女在以下地方与
以下人员一起生活:

<u>Time Period</u> 时间段	<u>City and State</u> 县和州	<u>Name(s) and Current Address of Person(s) with whom Child(ren) Lived</u> 与未成年子女一起生活的人员姓名与现用地址

5. I/We know of the following cases, or I/we have been involved (as a party, witness, etc.) in the following cases about
me/us, the other party(ies), or the child(ren). *Include cases such as custody, child support, guardianship, domestic
violence/protective order, paternity, divorce, visitation (child access), CINA, delinquency, termination of parental
rights, adoption or other cases.*

我/我们知道以下案件,或者我/我们曾参与(作为当事人、证人等)以下关于我/我们、另一当事方或子女的案件。
包括例如监护权、子女抚养费、监护人、家庭暴力/保护令、亲子关系、离婚、探视(探视子女)、需要援助的
儿童(CINA)、违法行为、父母权利终止、领养等案件或其他案件。

Case No. _____
案件编号 _____

Court 法院	Case No. 案件编号	Kind of Case 案件类型	Year Filed 提交年份	Result or Status (if you know) 结果或状态(如果您知道)

Attach the most recent court order for these cases.
附上这些案件的最近法院令。

6. I/We know of the following people, who are not parties to this case, who have physical custody of, or claim rights of legal custody (decision-making authority), physical custody (parenting time), or visitation (child access) with the minor child(ren):
我/我们认识下列人员, 他们不是此案当事人, 拥有未成年人子女的生活监护或要求未成年子女的合法监护权(决策权)、生活监护权(教养时间)或探视(子女探视)权。

Name(s) 姓名	Current Address 现用地址

7. It is in the best interest of the child(ren) that I/we have (*check all that apply*):

我/我们拥有以下权限最符合未成年子女的利益(勾选所有适用项):

joint primary physical custody (parenting time) of _____

Name(s) of child(ren)

because: _____

共同 主要生活监护(教养时间) _____

子女姓名

因为: _____

joint sole legal custody (decision making authority) of _____

Name(s) of child(ren)

because: _____

visitation with _____

Name(s) of child(ren)

共同 唯一合法监护(决策权) _____

子女姓名

因为: _____

以下子女的探访权 _____

子女姓名

I/We and the other party(ies) (*select one*):

我/我们和另一当事方(选择一项):

have agreed on a parenting plan(s) that we believe is/are in the best interest of the minor child(ren).
就我们共同认为符合未成年子女最佳利益的教养计划达成了一致意见。

Attach your signed parenting plan agreement.

附上您已签名的教养计划协议。

have not agreed on a parenting plan(s).
未就教养计划达成一致意见。

See: *Maryland Parenting Plan Instructions (CC-DRIN-109) and Maryland Parenting Plan Tool (CC-DR-109) or visit mdcourts.gov/parentingplans.*

请参阅: *马里兰州教养计划说明 (CC-DRIN-109) 和马里兰州教养计划工具 (CC-DR-109) 或访问 mdcourts.gov/parentingplans.*

8. The plaintiff/counter-defendant is the mother father _____
of the minor child(ren) and (*check all that apply*): Relationship (for example, aunt, grandparent, guardian)

原告/反诉被告是 母亲 父亲 _____
未成年子女, 并且(勾选所有适用项): 关系(例如阿姨/姑妈/伯母/舅妈、祖父/外祖父、监护人)

is not making child support payments.
没有支付子女抚养费。

is not making regular child support payments.
没有定期支付子女抚养费。

is not making child support payments in an amount required by the Maryland Child Support Guidelines.
没有按照马里兰儿童抚养指导方针的要求支付子女抚养费。

is making child support payments, but I/we need an Earnings Withholding Order.
支付了子女抚养费, 但我/我们需要申请扣留收入命令。

FOR THESE REASONS, I/we want the court to (check all that apply and attach forms indicated):

基于这些原因, 我/我们希望法院(勾选所有适用项并附上所示表格):

grant me/us joint primary physical custody (parenting time) of the child(ren).

授予我/我们未成年子女的 共同 主要生活监护(教养时间)。

grant me/us joint sole legal custody (decision-making authority) of the child(ren).

授予我/我们未成年子女的 共同 唯一合法监护(决策权)。

allow _____ to visit with the child(ren).

Name(s)

允许 _____ 探访子女。

姓名

allow _____ to visit with the child(ren)

Name(s)

允许 _____ 探访子女。

姓名

on the following terms (for example, how often, on what holidays, location of visits):

根据以下条款 (例如多久一次、在哪些节假日、探访地点):

_____。

allow no visitation because: _____

_____.

不允许探访, 因为: _____

_____.

order _____ to pay health insurance for child(ren).

Name(s)

下令 _____ 支付子女的健康保险费用。

姓名

order _____ to pay child support.

Name(s)

下令 _____ 支付子女抚养费。

姓名

If parents' combined gross monthly income (before taxes/not take home pay) is \$30,000 or less, attach Financial Statement (Child Support Guidelines) (CC-DR-030); if combined gross monthly income is more than \$30,000, attach Financial Statement (General)(CC-DR-031).

如果父母的月收入总和(税前/非实得工资)为 30000 美元或以下, 请附上财务报表(子女抚养费指南)(CC-DR-030);如果月收入总和超过 30000 美元, 请附上财务报表(一般)(CC-DR-031)。

(state other requests relating to the child(ren)): _____

_____.

Case No. _____
案件编号 _____

(说明与子女有关的其他请求): _____

- order any other appropriate relief.
- 下令任何其他合适的救济。

I/We solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my/our knowledge, information, and belief.

我/我们郑重地确认, 据我/我们所知所信, 本文件中的内容真实无误, 如有不实之处甘愿受作伪证之处罚。

Date
日期

Signature 1
签名1

Printed Name
正楷姓名

Street Address
街道地址

City, State, Zip
城市、州、邮编

Telephone Number
电话号码

E-mail
电子邮件

Fax
传真

Date
日期

Signature 2
签名 2

Printed Name
正楷姓名

Street Address
街道地址

City, State, Zip
城市、州、邮编

Telephone Number
电话号码

E-mail
电子邮件

Fax
传真

Case No. _____

案件编号 _____

CERTIFICATE OF SERVICE

送达证明

I/WE CERTIFY that on _____, a copy of this counter-claim and a copy
Date
of the forms listed above, were mailed, postage prepaid, to:

我/我们在此证明, 此反诉的副本及上述表格的副本均已于 _____,
日期
邮寄(邮资预付)至:

Opposing party 1 or their attorney
对方当事人 1 或其律师

Attorney Number
律师编号

Opposing party's or their attorney's address including city/state/zip
对方当事人或其律师的地址包括市/州/邮编

Date
日期

Signature
签名

Opposing party 2 or their attorney
对方当事人 2 或其律师

Attorney Number
律师编号

Opposing party's or their attorney's address including city/state/zip
对方当事人或其律师的地址包括市/州/邮编

Date
日期

Signature
签名