NOTICE: THIS DOCUMENT CONTAINS SENSITIVE DATA.

Fill in Cause number and court information exactly as it is written on the Petition.

Cause Number:			
In the Interest of the following Minor Child(r	en):		
(Write the full name of each child.)	In the	Court Number	_
1		Court Number	
2	Dist	rict Court	
3	Cou	inty Court at La	aw
4			
5	of	C	ounty, Texas
Respondent's Ori (Answer in Suit Affecting the Pa	_		
WARNING: Filing an Answer with the Court enters your a	appearance in this o	case. Talk to an	attornev
before filing an Answer if you 1) do not live in Texas and to make orders that would impose a personal obligation of file an Answer (or any other pleading) before filing a Specargue that Texas can't make such orders because you live determine if Texas has personal jurisdiction over you. For lawyer referral service or the State Bar of Texas Lawyer Rind the Legal Aid office nearest you, go to www.TexasLaw If you are a victim of family violence, get legal help by call	n you, such as an o ial Appearance, you e out of state. Ask a help finding a priva Referral Information vHelp.org and click	order for child su u will give up yo a Texas attorney ate attorney, call Service at 800-	ipport. If you ur right to to help you your local 252-9690. To
Print your answers.			
My name is:			
First Middle		Last	
I am a Respondent in this Suit Affecting the Parent-0	Child Relationship).	
The last three numbers of my driver's license number was issued in (State) Or			's license
The last three numbers of my social security number	r are:	·	
Or I do not have a social security number. 1. General Denial	Note: If you are the person who filed the Suit Affecting the Parent-Child Relationship, you are the Petitioner, not the Respondent. Only the Respondent can complete and file this Answer.		
l enter a general denial. I want to be notified of all h	earings in this cas	se.	
However, if the Petitioner and I reach an agreement the Parent-Child Relationship, I agree that the Judge notice of the hearing and without my coming to Cour	can finalize this		
2. Contact Information			
My mailing address is: Mailing Address	City	State	Zip
My email address is:			
My phone number is: ()	-		

I understand that if my mailing address or email address changes during this case, I must notify the following parties in writing:

- the Court,
- Petitioner's attorney (or Petitioner if Petitioner does not have an attorney), and
- the other Respondents' attorneys (or the Respondent if she or he does not have an attorney),
- the Office of the Attorney General Child Support Division (if the child receives public benefits such as CHIP).

I understand that—unless I provide notice of changes in my mailing address and email address—all information about this case, including the date and time of hearings, will be sent to me at the mailing address or email address in this Answer form.

3. Request for Relief

I ask the Court for general relief.

,			
Respondent's Signature	Date		
Respondent's Printed Name	Phone Number		
Mailing Address	City	State	Zip
Email Address	Fax (if available)		
4. Certificate of Service			
will give a copy of this document to each party or attorn document is filed with (turned in to) the Court as follows:		on the same day	this
If I file this document electronically, I will send a copy of possible. If not possible, I will give a copy to each party commercial delivery service, by fax, or by email.	•		•
If I file a paper copy of this document, I will give a copy of the mail, by commercial delivery service, by fax, or by em	•	party or attorney in	person,
→			
Respondent's Signature	Date		