

DV-105(A) City and State Where Children Lived

Case Number: _____

This form is attached to (check one):

- DV-105 (For person in ①): Use this form if you have children that have not lived together for the last five years.)
- DV-125 (For person in ②): Use this form to list where your children have lived for the last five years.)

(Use the space below to list where the child or children have lived for the last five years. Start with their current location.)

Name of child or children: _____

Children lived with (check all that apply):

Dates (month/year)		City, State, and Tribal Land	Me	Person in ②	Other*
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/> Check here if you want to keep your current location private. List the state only.			
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other* (relationship to child): _____

(Use the space below to list another child or children who have not lived with the child or children listed above. List where they have lived for the last five years. Start with their current location.)

Name of child or children: _____

Children lived with (check all that apply):

Dates (month/year)		City, State, and Tribal Land	Me	Person in ②	Other*
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/> Check here if you want to keep your current location private. List the state only.			
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From: _____	Until: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other* (relationship to child): _____

Check here to list other children with a different residence history than the children you've already listed. Use another form DV-105(A) and attach it to this form.

This is not a Court Order.

**City and State Where Children Lived
(Domestic Violence Prevention)**