

EXHIBIT 7A—Complaint to Rescind Paternity Acknowledgment

COMMONWEALTH OF MASSACHUSETTS

[____], ss.

Probate and Family Court Dept.
Docket No. 000000

_____))
 _____,))
 Plaintiff))
 _____,))
 v.))
 _____,))
 Defendant))
 _____))

COMPLAINT TO RESCIND PATERNITY ACKNOWLEDGMENT PURSUANT TO CHAPTER 209C, SECTION 11

1. The plaintiff resides at _____
(See an Assistant Register if listing this puts you in danger of abuse)
2. The defendant resides at _____
3. The plaintiff and the defendant executed an acknowledgment of paternity on _____ for the minor child: _____ [child's complete name] born on _____ at _____
(Attach a copy of the acknowledgment).
4. The minor child resides at _____
(See an Assistant Register if listing this puts you in danger of abuse)
5. Check all that apply:
 - The child has not received public assistance.
 - The child has received public assistance. (A copy of this Complaint must be sent to the Department of Revenue if the child currently or previously received public assistance).
6. The plaintiff/defendant represents that not more than 60 days have passed since the parties (*Cross out plaintiff or defendant above to indicate whether you are the plaintiff or defendant*) executed the acknowledgment of paternity and hereby, rescinds the acknowledgment of paternity.

Signature

Name

Street Address

City State Zip Code

Telephone _____

Date _____

(This complaint is to be served the same way as a Complaint to Establish Paternity).