

**Confidential**  
**FAMILY LAW INFORMATION FORM**

**PETITIONER:**

Name: \_\_\_\_\_

(Last, First, Middle)

Address \_\_\_\_\_

(City, State, Zip)

Phone \_\_\_\_\_

(Include area code)

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ SSN: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Employment Address and Phone: \_\_\_\_\_

**RESPONDENT:**

Name: \_\_\_\_\_

(Last, First, Middle)

Address \_\_\_\_\_

(City, State, Zip)

Phone \_\_\_\_\_

(Include area code)

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ SSN: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Employment Address and Phone: \_\_\_\_\_

**OTHER: Child Support Prosecutor:    Non-Parent with custody:    DCS:    Other:**

Name: \_\_\_\_\_

(Last, First, Middle)

Address \_\_\_\_\_

(City, State, Zip)

Phone \_\_\_\_\_

(Include area code)

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ SSN: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Employment Address and Phone: \_\_\_\_\_

**DEPENDANT CHILDREN INFORMATION:**

<b>Name</b>	<b>DOB</b>	<b>SEX</b>	<b>Race</b>	<b>SSN</b>
_____	_____	M    F	_____	_____
_____	_____	M    F	_____	_____
_____	_____	M    F	_____	_____

**PENDING CASES (if applicable)**

**Wife/Mother:** Do you have other court cases involving yourself and/or your children? Yes    NO

If yes, what type of case? (Criminal, Civil, Paternity, Protective Order

\_\_\_\_\_

What county or counties are the cases pending in?

\_\_\_\_\_

Please list case numbers if you have them:

\_\_\_\_\_

**Husband/Father:** Do you have other court cases involving yourself and/or your children? Yes    NO

If yes, what type of case? (Criminal, Civil, Paternity, Protective Order)

\_\_\_\_\_

What county or counties are the cases pending in?

\_\_\_\_\_

Please list case numbers if you have them:

\_\_\_\_\_

\_\_\_\_\_

Signature

\_\_\_\_\_

Date