Case ID No. Date **Domestic Relations Information Sheet** INFORMATION ON FATHER OF CHILD(REN) OR HUSBAND (Divorce Matters) MIDDLE INITIAL LAST NAME FIRST NAME ALIAS IF ANY MAILING ADDRESS RESIDENTIAL ADDRESS (IF DIFFERENT FROM MAILING ADDRESS) DATE OF BIRTH SOCIAL SECURITY NO. DPW NO HEIGHT WEIGHT RACE DISTINGUISHING FEATURES HAIR EYES PLACE OF EMPLOYMENT MEDICAL INSURANCE CARRIER NAME, ADDRESS WORK PHONE HOME PHONE POLICY NO. CHILDREN COVERED \square Yes \square No ATTORNEY NAME AND ADDRESS OCCUPATION SALARY ATTORNEY ID NO ATTORNEY PHONE NO. per_ INFORMATION ON MOTHER OF CHILD(REN) OR WIFE (Divorce Matters) FIRST NAME MIDDLE INITIAL ALIAS IF ANY LAST NAME MAILING ADDRESS RESIDENTIAL ADDRESS (IF DIFFERENT FROM MAILING ADDRESS DATE OF BIRTH SOCIAL SECURITY NO. DPW NO HEIGHT WEIGHT HAIR DISTINGUISHING FEATURES RACE EYES PLACE OF EMPLOYMENT MEDICAL INSURANCE CARRIER NAME, ADDRESS CHILDREN COVERED HOME PHONE WORK PHONE POLICY NO. \square Yes \sqcap No OCCUPATION ATTORNEY NAME AND ADDRESS SALARY ATTORNEY ID NO ATTORNEY PHONE NO. TOTAL NO. OF PEOPLE RECEIVING ASSISTANCE? DPW NO. DISTRICT RECEIVING FROM SEMI-MONTHLY GRANT AMOUNT IN HOUSEHOLD \square Yes □ No

PARTIES EVER		MARRIAGE DATE	PLACE	DATE	OF SEPARATION	DA	TE OF DIVORC	E PLACE
□ Yes	□ No							
IN	FORMAT	TON ON CAF	RETAKER OF C	CHILD(RE	N) OTHER T	THAN P	PARENT (1	(F ANY)
(First)	· -	(Middle)		(Last)	•	ATIONSHI	•	DATE
ADDRESS					HOME PHONE N	10	WOR	K PHONE NO.
ADDRESS					HOME I HOME I	Ю.	WOK	KTHONE NO.
					SOCIAL SECUR	ITY NO.		
			INFORMATION	ON ON CH	IILD(REN)			
NAME OF (First)			(Middle Initial)			SEX	(DATE OF BIRTH
CHILD						□ MAI	LE □ FEMALE	
SOCIAL SEC	URITY NO.		PLACE OF BIRTH		A	CTIVE CA	SE ASSISTAN	ICE
						□ Yes	□ No	
EATHED LICTI	ED ON BIRTH C	EDTIEICATE9	BORN OUT OF WEDLOC	TO MAGE	PATERNITY ESTAB	LICHED	DATE DATEDN	ITY ESTABLISHED
		ERTIFICATE!	orn out of wedloc □ Yes □ No		□ Yes □ No		DATE PATERN	III ESTABLISHED
NAME OF	(First)	()	Middle Initial)	(Last)		SEX		DATE OF BIRTH
CHILD	(= ====)	(-	,	(=)		□ M	ALE FEMAL	Е
SOCIAL SEC	LIDITY NO		PLACE OF BIRTH		la.	CTIVE CA	SE ASSISTAN	ICE
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	ED ON BIRTH C	ERTIFICATE?	BORN OUT OF WEDLOC	K? WAS F	PATERNITY ESTAB	LISHED	DATE PATERN	ITY ESTABLISHED
□ Ye:	s □ No		□ Yes □ No	1	\square Yes \square N	0		
NAME OF	(First)	(1)	Middle Initial)	(Last)		SEX		DATE OF BIRTH
CHILD						□ MA	LE FEMALE	i l
SOCIAL SEC	URITY NO.		PLACE OF BIRTH		A	CTIVE CA	SE ASSISTAN	ICE
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FATHER LISTE □ Y	ED ON BIRTH C		BORN OUT OF WEDLOC	CK? WAS F	PATERNITY ESTAB		DATE PATERN	ITY ESTABLISHED
⊔ I	es □ No		□ Yes □ No		□ Yes □ N	10		
NAME OF CHILD	(First)	(1)	Middle Initial)	(Last)		SEX	LE □ FEMALE	DATE OF BIRTH
CITILD						□ MA	LE LI TEMALE	'
SOCIAL SEC	URITY NO.		PLACE OF BIRTH		A		SE ASSISTAN	ICE
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FATHER LISTE □ Ye	ED ON BIRTH C es □ No	ERTIFICATE?	BORN OUT OF WEDLOC	CK? WAS F	PATERNITY ESTAB		DATE PATERN	ITY ESTABLISHED
NAME OF	(First)	()	Middle Initial)	(Last)		SEX		DATE OF BIRTH
CHILD	(= ====)	(-	,	(=)		□ MA	LE 🗆 FEMALE	ı
SOCIAL SEC	LIDITY NO		PLACE OF BIRTH		I A	CTIVE CA	SE ASSISTAN	ICE
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	ED ON BIRTH C		BORN OUT OF WEDLOC		PATERNITY ESTAB		DATE PATERN	ITY ESTABLISHED
□ Y	es □ No		□ Yes □ No		□ Yes □ No)		
NAME OF CHILD	(First)	(N	Middle Initial)	(Last)		SEX □ MA	LE □ FEMALE	DATE OF BIRTH
SOCIAL SEC	URITY NO.	j	PLACE OF BIRTH		A		SE ASSISTAN	ICE
						□ Ye	s □ No	