

DOMESTIC RELATIONS INFORMATION

Husband/Wife/Father/Mother on this form refers to the parties involved in this litigation, such as you and your present or former spouse, or you and the father of your child, or the parents of a child whose custody you seek.

Name of Husband/Father of child(ren) _____
Address of Husband _____ Tele # _____
Social Security # of Husband _____
Husband's County of Residence _____
Husband's Date of Birth _____
Race of Husband _____
of Marriages for Husband _____
Monthly income of Husband _____ Employer of Husband _____

Name of Wife/Mother of child(ren) _____
Address of Wife _____ Tele # _____
Maiden Name _____
Social Security # of Wife _____
Wife's County of Residence _____
Wife's Date of Birth _____
Race of Wife _____
of Marriages for Wife _____
Monthly income of Wife _____ Employer of Wife _____

Date of Separation of parties _____ Date of Divorce if already divorced _____
Date of Marriage of parties _____ County where divorce granted _____

Names of children of the parties, include date of birth

Names of children of prior marriage of Wife, date of birth

Names of children of prior marriage of Husband, date of birth

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