

**IN THE COURT OF COMMON PLEAS  
DIVISION OF DOMESTIC RELATIONS  
BUTLER COUNTY, OHIO**

**Date:** \_\_\_\_\_

**Case:** \_\_\_\_\_

**FAMILY INFORMATION SHEET**

**PARTIES IDENTIFYING INFORMATION**

Plaintiff's Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street

\_\_\_\_\_ City State Zip

Date of Birth: \_\_\_\_\_

Social Security: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Defendant's Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street

\_\_\_\_\_ City State Zip

Date of Birth: \_\_\_\_\_

Social Security: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

DR 729

Eff. 1/1/2015

Rev. 5/2020

Children of the Marriage:

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_