

**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
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Address:

Street

City	State	Zip
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Date of Birth:

Social Security:

Telephone:

Defendant's Name:

Last	First	Middle
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Address:

Street

City	State	Zip
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Date of Birth:

Social Security:

Telephone:

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: _____

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Date of Birth: _____
SSN: _____

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Date of Birth: _____
SSN: _____