

1. Today's date: _____
2. Your full name:(the one you most commonly use)_____
3. Full name of the person you are suing:_____
4. Any other names he/she uses:_____

Location of the person you are suing?

5. Do you know where this person live or works? Yes No

A) If yes please write the address including city and state:_____

- Is this the home address? Yes No

Business address? Yes No

B) If no, when is the last time you had contact with the other person?
(month/year)_____

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- C) If you do not know where the person lives or works, do you have a way to find out? Yes No

If yes please describe how:

- D) Is the person in the military? Yes No

■ If yes, is it: the reserves? Or Yes No

■ the “regular” military? Yes No

- E) Do you know where he/she is stationed? Yes No

If yes, where?

5. Do you have any children with the person you are suing? Yes No

If you do not have any children, go to question # 10.

- How many _____
- Are any of your children over the age of 12? Yes No
- Over the age of 18? Yes No
- Are you pregnant with a child of the person you are suing? Yes No

- A) Do all of the children live with you? Yes No
If no, with whom do the children live? other parent other relative other person
- B) During the last 5 years, have the children ever lived outside of California? Yes No
- C) During the last 5 years have the children lived with anyone except you or the other parent? Yes No

- D) Do the children now live in Los Angeles County? Yes No

If no, where do the children live?(address/city/state)

- How long have the children lived there? _____
- Are they there with your consent? Yes No
- Please describe the reasons why? _____

- 6) If your children do not live with you, are you able to see them at all the time? Yes No

If you cannot see them all the time, please describe the reasons why: _____

- 7) Have you ever been to court before about these children? Yes No

Before you answer, please look over this list and answer “yes or no” :

- A) Has there ever been or is there now a case in juvenile court(also known as dependency court” or a “child neglect” or “abuse” case) brought by the Department of Children

Services(DCS)? Yes No

If yes, do you have the court papers? Yes No
When did you court last (month/year) _____

B) Have you ever been to court about a restraining order (to get or oppose one)? Yes No

If yes do you have the court papers? Yes No
When did you last go to court last? (month/ year)

C) Have you ever filed or answered another case against the other person about these children? Yes No

1 Divorce 1 Paternity 1 Other (describe) _____

8) Are there any reasons why you think the other person should not see the children all the time? Yes No

If yes, what are your reasons:

9) How often, when and where would you like the other person to see the children? Please write what you would like to see happen:

Violence and Harassment In Your Family

Has there ever been any violence or harassment in your family (this includes hitting, throwing, yelling beating, kicking, threatening, sex without consent and physical or sexual abuse of children)? Yes No

If yes, please describe what happen:

If there has been violence, who got hurt? me my children

10) When was the last time since there was any violence or harassment in your family? (month/year) _____

12) Were the police ever called? Yes No

If yes, when was the last time (month/year) _____

If yes, what happened?

Do you have police reports? Yes No

13) Did you ever have to go to a doctor or hospital because of injuries caused by violence in your family? Yes No

Do you have medical records? Yes No

14) Did you ever go to court to get or oppose a restraining order For domestic violence? Yes No

If yes when did you do this? (month/year)_____

If yes, do you have court papers? Yes No

15) Does the person you are suing have any of the following problems?

Alcohol (drinks too much) Yes No

Drugs (uses any type of illegal drug) Yes No

16) Has the person you are suing ever been arrested or in jail for:

A) Assault and/or battery Yes No Don't Know

B) Rape or attempted rape Yes No Don't Know

C) Assault with a dangerous weapon Yes No Don't Know

D) Sexual or physical abuse of a child Yes No Don't Know

E) Violation of a restraining Order Yes No Don't Know

F) Driving under the influence

Of drugs or alcohol Yes No Don't Know

G) Carrying a concealed weapon Yes No Don't Know

H) Possession or sale of an

Illegal drug Yes No Don't Know

I) Murder or attempted murder Yes No Don't Know

J) Any other crime Yes No Don't Know

17) Is the other person, to the best of your

Knowledge, a member of a gang? Yes No

18) Does the other person own/carry/

Sell weapons (guns, knives)? Yes No

Income, Health Insurance and Bills:

19) Does the other person who you are

Suing work? Yes No

If yes, do you have or can you obtain the following information about her/his job:

■ Name and address of employer: Yes No

■ How much s/he earns per month: Yes No

■ If s/he has health insurance available

through his/her job: Yes No

■ If the person does not work, how does s/he support himself?

Social Security SSI AFDC General Relief

Unemployment State Disability Worker's Compensation

Self-Employment Other (describe)

20) Do you or your children receive AFDC ? Yes No

Do you or your children receive

Food Stamps? Yes No

If yes, do you have Medi-Cal ? Yes No

21) Do you work? Yes No

If yes, how much do you earn before taxes each month?

If yes, how much do you pay per month for child care?

22) Have you ever been contacted by or applied to the District Attorney for help about or to pay child support? Yes No

If yes, when did you first give contact with the DA (month/year) _____

If yes, what happened? _____

If yes, do you have papers from the

District Attorney? Yes No

Did the District Attorney ever go to

Court about support for your family? Yes No

23) Do you have any health insurance (not

Including Medi-cal)? Yes No

If yes, how much does it cost per month? _____

If yes, does it cover the children? Yes No

If no, who is covered? _____

■ Do you have any medical bills not covered

by insurance? Yes No

If yes, please name them and the amount(s) owed: _____

24) Does the other person have health insurance? Yes No

If yes, what is the name of the insurance company? _____

If yes, if insurance is available through someone other than his/her employer,

Please state who: _____

If yes, what does it cover? _____

If yes, is s/he paying for you? Yes No

If yes, is s/he paying for the children? Yes No

If insurance exists but is not being provided by the other person, please explain the reasons why: _____

If yes, what does it cover(for example, dental, hospital stays, emergency care, etc.)? _____

Any Other Cases:

- 25)** Did you ever previously sue or have you been sued by the other person for a Divorce, legal separation. Annulment, paternity, custody, visitation, District Attorney or any other kind of case? Yes No

If yes, please describe the type of case and when this happened: (type/date)

Do you have the court papers? Yes No

Other: _____

- _____
26) (a) Do you have any definite plans to move in

the next 12-15 months? Yes No

If yes where? _____

If yes, do you plan to move with your minor child(ren)?

Yes No

- (b)** If you have a minor child(ren) with the person you are suing , do you plan

to take the child(ren) on a vacation outside of the state of California within the next 12-15 months? Yes No

Only answer the rest of the questions if you are married to and trying to get a divorce from the person you are suing:

27) Date of marriage: _____

Date of separation(this is the date you decided your marriage was over): _____

Property:

28) A) Does your spouse have a pension? Yes No Don't Know

B) Is your spouse a member of a union? Yes No Don't Know

C) Has your spouse worked at one job for a long period of time ? Yes No Don't Know

D) Was your spouse ever in the military? Yes No Don't Know

If yes, for how long (mo/year) _____

When did s/he leave the military(mo/year) _____

28) Did you and or your spouse ever file

Bankruptcy? Yes No Don't Know

If yes , when did you file?(mo/year)? _____

If yes, please describe what happened: _____

If yes do you have any bankruptcy court papers? Yes No

29) Please indicate below any property or bills (debts) you and your spouse acquired before, during or after the marriage which you still have or owe. Please note: it doesn't matter whose name is on it! Just tell us when it was acquired.

Items Acquired:

Real Estate During Marriage Before Marriage After Separation

Located in Los Angeles? Self Spouse

Yes No

Located somewhere else

in California? Self Spouse

Yes No

Located in another state? Self Spouse

Yes No

Located in another country Self Spouse
outside of the U.S.?

Yes No

Please describe the real estate: _____

Household Furniture, Furnishing Self Spouse
and Appliances

Please describe only the items that are important to you: _____

Jewelry Self Spouse

Cars and Trucks Self Spouse

Savings Accounts Self Spouse

Please name the banks _____

Checking Accounts Self Spouse

Please name the banks _____

Credit Unions Self Spouse

Please name the credit unions _____

Life Insurance Self Spouse

Please name the policies _____

Tax Refunds Self Spouse

Please list the years for which they are due- _____

Stocks and Bonds Self Spouse

Pensions Self Spouse

Profit Sharing Plans "IRAs" Self Spouse

Cash Self Spouse

Any other property Self Spouse

Please describe

BILLS AND DEBTS

Items Acquired: **During Marriage** **Before Marriage** **After Separation**

Student Loans Self Spouse

Please list them : _____

Credit Cards Self Spouse

Please list them: _____

Unpaid Taxes Self Spouse

Please list the years for which they are owed _____

Medical and Dental Bills Self Spouse

Please list them _____

Furniture Bills Self Spouse

Please list them: _____

Debt owed on cars

And trucks: Self Spouse

Please list them: _____

Mortgages Owed on

Real Estate Self Spouse

Please list them: _____

Any other bills or
Debts owed

Self Spouse

Please list them:
