

DOMESTIC RELATIONS STANDARD INFORMATION

Menu Name..... Practice domestic

County (Form Heading)..... WHATEVER

Case No 12345432

File No ABC

CSEA No 2323232323

Client:

Full Name Mary Sue Smith

First Name Mary

Middle Initial S

Last Name Smith

Street Address 1234 Client St.

City Cincinnati

State Ohio

Zip Code 45234

City, State Zip Cincinnati, Ohio 45234

Home Area Code 513

Home Phone Number (w/o area code) 123-4321

Work Area Code 513

Work Phone Number (w/o area code) 345-4321

Social Security Number 123-45-6543

Date of Birth 05/06/1980

 Check here if you want the date of birth in long format. Example: March 2, 2002

Check the ones applicable:

 Plaintiff Obligee Wife Mother Petitioner1 Defendant1 Defendant Obligor Husband Father Petitioner2 Defendant2 Petitioner Respondant**Employer of Client:**

Full Name Client Employer, Inc.

Street Address 5656 Employer St.

City Cincinnati

State Ohio

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 Zip Code 45432
 City, State Zip Cincinnati, Ohio 45432
 Area Code 513
 Telephone Number (without area code) ... 654-3456

Attorney for Client:

Full Name Martin Q. Attorney
 Street Address 7676 Attorney St.
 City Cincinnati
 State Ohio
 Zip Code 45678
 City, State Zip Cincinnati, Ohio 45678
 Area Code 513
 Telephone Number (without area code) ... 345-4567
 Registration Number 1234321

Health Insurance for Client:

Name of Insurer Client Health Services
 Street Address 4343 Client Clinic Blvd.
 City Cincinnati
 State Ohio
 Zip Code 56789
 City, State Zip Cincinnati, Ohio 56789
 Area Code 513
 Telephone Number (without area code) ... 544-9876
 Policy / Group Policy 343534

Opposing Party:

Full Name John Thomas Smith
 First Name John
 Middle Initial T
 Last Name Smith
 Street Address 5454 Opposing St.
 City Cincinnati
 State Ohio
 Zip Code 54546

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 City, State Zip Cincinnati, Ohio 54546
 Home Area Code 513
 Home Phone Number (w/o area code) 345-7654
 Work Area Code 513
 Work Phone Number (w/o area code) 456-9876
 Social Security Number 987-67-8987
 Date of Birth 04/05/1980

Check here if you want the date of birth in long format. Example: March 2, 2002

Check the ones applicable:

Plaintiff Obligee Wife Mother Petitioner1 Defendant1
 Defendant Obligor Husband Father Petitioner2 Defendant2
 Petitioner
 Respondant

Employer of Opposing Party:

Full Name Opposing Employer, Inc.
 Street Address 3456 O. Employer St.
 City Cincinnati
 State Ohio
 Zip Code 54546
 City, State Zip Cincinnati, Ohio 54546
 Area Code 513
 Telephone Number (without area code) ... 987-9876

Attorney for Opposing Party:

Full Name Samuel S. Oppatt
 Street Address 4545 Oppatt St.
 City Cincinnati
 State Ohio
 Zip Code 56789
 City, State Zip Cincinnati, Ohio 56789
 Area Code 513
 Telephone Number (without area code) ... 345-6543
 Registration Number 121212

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Health Insurance for Opposing Party:

Name of Insurer Opposing Health Services

Street Address 9876 O. Clinic St.

City Cincinnati

State Ohio

Zip Code 56789

City, State Zip Cincinnati, Ohio 56789

Area Code 513

Telephone Number (without area code) 345-8765

Policy / Group Opp group 45

Enter the children information below:

Child 1:

Full Name Henry M. Smith

Date of Birth 01/01/2001

Check here if you want the date of birth in long format. Example: March 2, 2002

Social Security Number 345-67-8765

Child 2:

Full Name Joyce R. Smith

Date of Birth 02/02/2002

Check here if you want the date of birth in long format. Example: March 2, 2002

Social Security Number 456-78-9876

Child 3:

Full Name Thomas L. Smith

Date of Birth 03/03/2003

Social Security Number 987-65-6789

Check here if you want the date of birth in long format. Example: March 2, 2002

Child 4:

Full Name

Date of Birth

Check here if you want the date of birth in long format. Example: March 2, 2002

Social Security Number

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- Top Right 2... Optional DR top right 2
- Bottom Left ... Optional DR bottom left
- Bottom Right . Optional DR bolttom right

To add Magistrate name / Judge name on the forms:

Magistrate Name Sandra T. Magistrate

Judge Name Michael L. Judge

If you want to blank out the judge's name check here:

Supplemental Attorney Signature Lines:

First Line _____

Second Line Martin Q. Attorney

Third Line 7676 Attorney St.

Fourth Line Cincinnati, Ohio 45678

Fifth Line (513) 345-4567

Sixth Line Reg # 1234321

Seventh Line

Eighth Line