



**Superior Court of Washington
County of Mason**

FAMILY LAW TRIAL INFORMATION FORM (LSPR 94.04)

Case Name: _____ Case No.: _____

Filed by: _____ Date: _____

PARTIES:

PETITIONER(S)		RESPONDENT(S)	
Name:	Age:	Name	Age:
Address:		Address:	
Name:	Age:	Name	Age:
Address:		Address:	

Date of Marriage:	Date of Separation:
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DEPENDENT CHILDREN:

Name	Age	This Relationship	Prior Relationship	Percent Residential Time (include current & proposed schedule)			
				Current (since ___/___/___):	Proposed:	Petitioner %	Respondent %
				Current (since ___/___/___):	Proposed:		
				Current (since ___/___/___):	Proposed:		
				Current (since ___/___/___):	Proposed:		
				Current (since ___/___/___):	Proposed:		

CHILD SUPPORT:

1.

	NET INCOME	SUPPORT
Petitioner:	\$ _____	_____
Respondent:	\$ _____	_____

2. Tax Exemptions allocated as follows: _____

3. Exceptional support considerations: _____

4. Child Support presently being paid \$ _____ per month; since _____

5. Summary of proposed residential arrangements for the children: _____

YOU MUST ATTACH:
 1. Support Worksheets and current pay stubs. Form WSCSS
 2. Completed Financial Declaration. Form FL All Family 131
 3. Proposed Parenting Plan, if disputed. Form FL All Family 140

MAINTENANCE:

1. Requested by _____: \$ _____ per month, duration: _____

2. Presently being paid: \$ _____ per month, for _____ months.

PETITIONER INCOME:

Employer/Other Source	Length	Gross Income	Net Income
		Total Income	

RESPONDENT INCOME:

Employer/Other Source	Length	Gross Income	Net Income
		Total Income	

FACTORS RELATING TO AWARD OF MAINTENANCE: _____

IF ATTORNEY FEES ARE AT ISSUE:

1.	Incurred to Date	\$ _____	Paid To Date	\$ _____
2.	Ordered to Date	\$ _____	Paid to Date	\$ _____
3.	Requested to Date	\$ _____	Estimate to Trial	\$ _____

PROPERTY DIVISION:

ASSETS:	Fair Market Value	Debt Owed	Net to Petitioner	Net to Respondent
Real Estate:				
Home	\$	\$	\$	\$
Other Real Property	\$	\$	\$	\$
	\$	\$	\$	\$
Vehicles (Year/Make):				
	\$	\$	\$	\$
	\$	\$	\$	\$
Household Goods	\$	\$	\$	\$
Tools/Equipment	\$	\$	\$	\$
Recreational/Hobby Equipment	\$	\$	\$	\$
Business/Profession:				
Petitioner	\$	\$	\$	\$
Respondent	\$	\$	\$	\$
Investments	\$	\$	\$	\$
Life Insurance Cash Value	\$	\$	\$	\$
Retirement:				
Petitioner	\$	\$	\$	\$
Respondent	\$	\$	\$	\$
IRA's, TSP's, 401-K's, etc.:				
Petitioner	\$	\$	\$	\$
Respondent	\$	\$	\$	\$
Receivables	\$	\$	\$	\$
Other Assets:				
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Debts:	(\$)	(\$)	(\$)	(\$)
TOTALS	\$	\$	\$	\$
Equalization:	\$	- \$	divided by two (2)	= \$

Proposed Percentage Division: _____ % to Petitioner _____ % to Respondent

Effects of Proposed Division: \$ _____ to Petitioner \$ _____ to Respondent