



Superior Court of Washington  
County of Mason

**DO NOT FILE WITH THE CLERK OF THE COURT**

***This form is to be brought to Court Administration,  
Room 201 or 202 or mailed to PO Box X, Shelton, WA 98584***

FAMILY LAW SETTLEMENT CONFERENCE INFORMATION FORM

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)	
				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:	(\$ )	(\$ )	(\$ )	(\$ )
<b>TOTALS</b>	\$	\$	\$	\$
Equalization:	\$	- \$	divided by two (2)	= \$

Proposed Percentage Division: \_\_\_\_\_ % to Petitioner      \_\_\_\_\_ % to Respondent

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