

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT - DOMESTIC RELATIONS DIVISION

IN RE THE MARRIAGE CIVIL UNION CUSTODY
 SUPPORT OF:

PETITIONER

AND

RESPONDENT

NO. _____

CALENDAR: _____

FAMILY SUPPORT AFFIDAVIT

This completed form must be attached to any judgment, decree or order of court which contains an initial or modification of an order for the payment of child support and/or maintenance. Both parties may use one form or they may complete separate forms. If either party is not present, both Part I and Part II must be completed by the party who is present to the best of her/his information and belief.

PART I. To Be Completed by Custodial Parent

Full Name _____ Date of Birth _____

Residential Address _____

City _____ County _____ State _____ Zip _____

Mailing Address (if different) _____

Social Security No. _____ Home phone (____) _____ Work phone (____) _____

Employer _____

Address _____

City _____ County _____ State _____ Zip _____

Driver's License No. (Illinois) _____ Driver's License No. (other state) _____

Child(ren) covered by Order For Support:

<u>Full Name(s)</u>	<u>Sex</u>	<u>Date of Birth</u>	<u>Social Security No.</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Child (ren) receiving Public Assistance? (Yes or No) _____

If yes, give case number: _____

Title IV-D Program (Yes or No) _____

If yes, give case number _____

See Reverse Side

