

## CHILDREN INFORMATION

### FIRST CHILD

FULL NAME \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)  
SEX \_\_\_\_ BIRTHDATE \_\_\_\_\_  
PLACE OF BIRTH \_\_\_\_\_  
(CITY) (STATE) (COUNTY)  
SOCIAL SECURITY NUMBER \_\_\_\_\_  
PRESENT RESIDENCE \_\_\_\_\_

### SECOND CHILD

FULL NAME \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)  
SEX \_\_\_\_ BIRTHDATE \_\_\_\_\_  
PLACE OF BIRTH \_\_\_\_\_  
(CITY) (STATE) (COUNTY)  
SOCIAL SECURITY NUMBER \_\_\_\_\_  
PRESENT RESIDENCE \_\_\_\_\_

### THIRD CHILD

FULL NAME \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)  
SEX \_\_\_\_ BIRTHDATE \_\_\_\_\_  
PLACE OF BIRTH \_\_\_\_\_  
(CITY) (STATE) (COUNTY)  
SOCIAL SECURITY NUMBER \_\_\_\_\_  
PRESENT RESIDENCE \_\_\_\_\_

### FOURTH CHILD

FULL NAME \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)  
SEX \_\_\_\_ BIRTHDATE \_\_\_\_\_  
PLACE OF BIRTH \_\_\_\_\_  
(CITY) (STATE) (COUNTY)  
SOCIAL SECURITY NUMBER \_\_\_\_\_  
PRESENT RESIDENCE \_\_\_\_\_

Attach a separate sheet of paper to provide the above information for each additional child.

The Texas Family Code requires that the judge consider the "best interest of the child" above all else;

however, there is a state law that presumes that naming the parents **joint managing conservators** of the children is in their best interests. This **does not** mean equal time with the children, but that the children live with one parent and the other parent has visitation. The Law requires that the parent with primary possession, including the right to determine where the children live, be paid child support by the other parent. The Family Code states that the support will be a certain percentage of the Obligor's (the person paying child support) disposable earnings, which is income before taxes (Gross earnings) less social security and federal income withholding tax at the rate of single with one exemption. The percentage will depend on the number of children and if the party paying support has any other children to pay support for

Additionally, in most cases, the Judge will also order that all payments for child support be withheld from the Obligor's net pay and a \$15.00 fee is required by the Court to accomplish this form of paying child support. A withholding order will be filed with the Court, but it is up to the party receiving support to file a request and pay the fee. One of the only exceptions to this rule is an Obligor who is self-employed. If the payments are withheld, there is no need for an allotment. If the payments are not withheld, all payments should be made through the Clerk of that Court as stated in the Final Decree of Divorce.

Note: The Obligor (party paying support) is also required to maintain health insurance on the children through their employment, or reimburse the other party for their health insurance on the child(ren). Military personnel must have the children enrolled in the DEERS program and civilian personnel must be prepared to present a health insurance policy covering the children of the marriage. All uninsured expenses will be split 50/50 by the parties.

Who will have primary possession of the child(ren)? Wife\_\_\_\_Husband\_\_\_\_\_

Are there any other children not listed here for whom the party who will be paying child support is currently obligated to pay support for or whom you have custody of at this time? Yes\_\_\_\_\_No\_\_\_\_\_

If Yes, how many other children are being supported? \_\_\_\_\_ Amount of monthly support? \_\_\_\_\_

Do you or have you or your spouse ever started a suit of any kind through the Attorney General's Office in any county? \_\_\_\_\_ **If yes, you must provide this office with a copy of the all orders on any such suit.**

Husband Gross wages per month (before taxes): \_\_\_\_\_  
A current pay voucher, if available.

Wife Gross wages per month (before taxes): \_\_\_\_\_  
A current pay voucher, if available.

Health Insurance is normally to be paid by the party who is paying support, either by obtaining it through the employer of the party paying support or reimbursing the party with primary possession the cost of the monthly premium to cover the children through their employer.

Health Insurance will be provided by \_\_\_\_ husband's employer \_\_\_\_ wife's employer

Name of Plan and Company \_\_\_\_\_

Who will pay the premium? \_\_\_\_\_ Monthly Cost (just for child) \_\_\_\_\_

### VISITATION

Below is a list of the choices you have on visitation when the parties live within 100 miles of each other. Please check a beginning and ending time.

Wednesday during the school year: from the time school is dismissed \_\_\_\_\_; or 6:00 p.m. \_\_\_\_\_; and until 8:00 p.m. \_\_\_\_\_ or until school starts the following day\_\_\_\_\_.

First, third, and fifth Friday of each month: from the time school is dismissed on Friday \_\_\_\_\_; or 6:00 p.m. \_\_\_\_\_; until 6:00 p.m. on Sunday \_\_\_\_\_; or until school starts on Monday \_\_\_\_\_.

Pick up and return; the party not having primary conservatorship of the child(ren) picks up the child(ren) from the primary conservator's residence. Who will be responsible for the return of the children after visitation?  
Husband \_\_\_\_\_ Wife \_\_\_\_\_

If you think that you will be living a long distance from your spouse after the divorce, airline flight information may need to be added to the decree. If so, will the parties split the cost?\_\_\_\_\_ If not, who pays?  
\_\_\_\_\_

### VERIFICATION OF NOTICE

The judges in Bell County have entered an order requiring all parties to a divorce action with children involved to attend a class regarding how to cope with divorce. This course must be completed prior to the final court date. A registration form is attached for you to use. **Failure to attend this course may result in the delay of your divorce or in the court ordering sanctions (money fine) against you.** This class will be beneficial in learning how divorce affects your children and how you can help them in dealing with the divorce.

I, \_\_\_\_\_ hereby certify that I have been informed about the Children Coping with Divorce Course requirement and understand the potential consequences of my failure to take the class.

\_\_\_\_\_  
CLIENT SIGNATURE