

SUIT AFFECTING THE PARENT-CHILD RELATIONSHIP INFORMATION PACKET

Please complete this packet completely and accurately. The amount of time and effort you put into filling out this packet is directly related to the amount of time necessary to complete your petition and other documents needed to obtain your Suit Affecting the Parent-Child Relationship. There is a purpose for each question contained herein and it is imperative that you answer each question. Failure to answer these questions may delay your Suit Affecting the Parent-Child Relationship.

GENERAL INFORMATION

CLIENT (PETITIONER) INFORMATION:

SEX - MALE OR FEMALE _____ RACE _____
FULL NAME _____ MAIDEN NAME (If applicable) _____ ADDRESS _____
CITY _____ STATE _____ ZIP _____
COUNTY _____
HM PHONE _____ WK PHONE _____ MOBILE/PAGER _____
AGE & DATE OF BIRTH _____ PLACE OF BIRTH: _____ SOCIAL SECURITY NO. _____ EMAIL _____
DRIVER'S LICENSE NO. _____ STATE OF ISSUANCE _____

OCCUPATION

POSITION OR RANK _____
EMPLOYER'S NAME AND ADDRESS (DUTY ADDRESS IF MILITARY) _____

RESPONDENT'S INFORMATION

SEX - MALE OR FEMALE _____ RACE _____
FULL NAME _____ MAIDEN NAME (If applicable) _____ ADDRESS _____
CITY _____ STATE _____ ZIP _____
COUNTY _____
HM PHONE _____ WK PHONE _____ MOBILE/PAGER _____
AGE & DATE OF BIRTH _____ PLACE OF BIRTH _____ SOCIAL SECURITY NO. _____
DRIVER'S LICENSE NO. _____ STATE OF ISSUANCE _____

OCCUPATION

POSITION OR RANK _____
EMPLOYER'S NAME AND ADDRESS (DUTY ADDRESS IF MILITARY) _____

CHILDREN INFORMATION

FIRST CHILD

FULL NAME _____ SEX _____ BIRTHDATE _____

_____ PLACE OF BIRTH _____
(CITY) (STATE) (COUNTY)

SOCIAL SECURITY NUMBER _____

PRESENT RESIDENCE _____

SECOND CHILD

FULL NAME _____ SEX _____ BIRTHDATE _____

_____ PLACE OF BIRTH _____
(CITY) (STATE) (COUNTY)

SOCIAL SECURITY NUMBER _____

PRESENT RESIDENCE _____

THIRD CHILD

FULL NAME _____ SEX _____ BIRTHDATE _____

_____ PLACE OF BIRTH _____
(CITY) (STATE) (COUNTY)

SOCIAL SECURITY NUMBER _____

PRESENT RESIDENCE _____

JURISDICTIONAL INFORMATION

1. How long have you resided in the State of Texas?
_____ Years _____ Months
2. How long have you resided in this county?
_____ Years _____ Months
3. How long have the children resided in this State and County?
_____ Years _____ Months

The current 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 as follows:

1 Child	20% of disposable earnings
2 Children	25% of disposable earnings
3 Children	30% of disposable earnings
4 Children	35% of disposable earnings

Additionally, in most cases, the Judge will also order that all payments for child support be withheld from the Obligor's net pay (a \$15.00 fee is required by the Court to accomplish this form of paying child support). 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.

1. Which of the following provisions do you wish to establish in this suit?

- _____ Child Support
- _____ Custody and Visitation
- _____ Paternity

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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.**

Father Gross wages per month (before taxes): _____
A current pay voucher, if available.

Mother 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 ____ father's employer ____ mother'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. Do we need to include flight information? _____ If so, will the parties split the cost? _____ If not, who pays? _____