

## The Self Help Legal Information Network

(310) 675-3863 \*\* office (310) 675-3853 \*\* fax

www.legalinfonetwork.com

## Child Custody, Visitation and/ or Child Support Questionnaire

I am providing this information for the purpose of completing a <u>Child Custody/Visitation and or Support Questionnaire</u>. I understand that I am having my documents prepared by a Paralegal – Legal Document Assistant and if I have any questions, concerns or need legal advice I may need to contact an attorney. I understand The Self-Help Legal Information Network is not composed of attorneys and cannot give legal advice (ie. tell me the best method for my situation, tell me what forms to complete, tell me the process, or give me their opinion). I understand that I am responsible for filing and/or serving any necessary documents unless otherwise noted.

Name	Date
Signature	<u> </u>

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## Child Custody, Visitation and/or Child Support Questionnaire -

## YOU ARE REQUESTING AN ORDER FOR:

CUS	TODY	VISITATION	SUPPORT		
1Y	our full na	me (include first,	last and middle ini	tial)	
2. Y	ou are the:	Mother	Father		
3	ddress				
	·	State Zi	p		
	·	-	_ cell		wk
5. W	hat is the o	ther parent's full	name:		
6. W	ho does chi	ild live with: You	ı other parent	Other	
7. W	hat is other	r parent's address	<b>3:</b>		

Full Name of child (first, middle, last)	Birth date / age	Birth place (city & state)	Sex M/F
(for unborn - write unborn)			
	/		
	/		
	/		
	/		
	/		

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8
Full address of child
For how long?
9. Who does child reside with? (name)
(relationship) mom dad grandma grandpa other
10
10Address of person child resides with.
11. Child spends% with mother% with father
Do you want an order for: Child Custody Visitation
You are requesting: petitioner respondent joint other Legal custody for
Physical custody for
12. Specify your visitation schedule request:
Days: Mon. Tues. Wed. Thur. Fri. Sat. Sun
How often?
What times? (from / to)
13. Why?
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16.	If so, to start when?
17.	Who are you requesting to provide travel to the drop-off and or Pick-up location?
	Petitioner Respondent
18.	Where would you like the visitation <u>or</u> exchange to be held:  Exchange Visitation
	Who is responsible for transportation costs.  How much time do you request to be notified by other party if they relocate or change
	Who is responsible for transportation costs  How much time do you request to be notified by other party if they relocate or change.
	Who is responsible for transportation costs  How much time do you request to be notified by other party if they relocate or change another residence? job?
20.	Who is responsible for transportation costs  How much time do you request to be notified by other party if they relocate or change another residence? job?  home, cell or business telephone number?
20.	Who is responsible for transportation costs  How much time do you request to be notified by other party if they relocate or change another residence? job?  home, cell or business telephone number? children's school?
220. 221.	Who is responsible for transportation costs
220. 221. 222.	Who is responsible for transportation costs
20. 221. 222. 23.	Who is responsible for transportation costs  How much time do you request to be notified by other party if they relocate or change another residence? job?  home, cell or business telephone number? children's school?  mailing address? children's school?  Would you like children to have telephone contact with other party?  If during visitation exchange the other party is late how much time would you like to them before considering the visitation cancelled?  Approximate percentage of time each parent has physical responsibility for the child Mom % Dad %
20. 21. 22. 23. 24.	Who is responsible for transportation costs  How much time do you request to be notified by other party if they relocate or change another residence? job?  home, cell or business telephone number?  mailing address? children's school?  Would you like children to have telephone contact with other party?  If during visitation exchange the other party is late how much time would you like to them before considering the visitation cancelled?  Approximate percentage of time each parent has physical responsibility for the child Mom % Dad %  How many hours before visitation do you request other party not drink?

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Case#	Court	County	
Type of case:			
on custody, visitation	nt custody of the child or children n and or support issues? (please s to take any proof with you.)		

PLEASE COMPLETE INCOME AND EXPENSE QUESTIONAIRE ALSO.

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