IN THE FAMILY COU	RT OF	COUNTY, WEST VIRGINIA			
IN RE: The Marriage / Children Of:			Case No Judge:		
Petitioner (First/Middle/Last	and	Responder	Respondent (First/Middle/Last)		
PET	ITIONER'S CIVIL CASE INF DOMESTIC RELAT			MENT	
PETITIONER'S	DENTIFYING INFORMATION	IMPORTANT NOTICE			
Asian or Pacifi Unknown	White	Female	the CONI fear to sa If the page No with to You Affiday Infor	this box if you wish to keep information in this box FIDENTIAL because you for your safety and/or the afety of your children. box above is checked, this is sealed in the file and OT TRANSMITTED the Petition and Summons. must complete the form, wit To Withhold Identifying rmation, and file it at the Circuit Clerk's Office.	
List all minor children affe	cted by this action:	Date of 1	Rirth	Social Security Number	
ranc		/	/	Social Security Number	
		/	/		
		/	/		
		/	/		
YES NO Do you to a disa	or any of your clients or witness bility? Wheelchair accessible hearing Interpreter or other auxiliary Reader or other auxiliary aid Spokesperson or other auxiliary Others	ng room and aid for the h	other facilit nearing impa ally impaire	ies; ired; d;	

copies of petition enclosed/attached.

Original and

PETITIONER:				Case No.				
ONDENT	Г:							
o Answe	er:	Type o	of Service:					
1. RESPONDENT'S IDENTIFYING INFORMATION				2. TYPE OF CASE RELIEF (Check All That Apply)				
Address			Divorce Without Children Divorce With Children Grandparent Visitation					
City / State / Zip Code					Annulment			
•				M.1. / Famala	Separate Maintenance Child Support Only			
Number				Maie / Female	Child Custody Without Divorce Paternity			
Social Security Number Date of Birth				Modification				
Ame	erican	Indian/Alaska	n Native	Hispanic	Contempt Infant Guardianship			
Asia	an or F	Pacific Islander		Black	Other (specify):			
Unk	nown			White				
YES	NO	Is either party	seeking ch	nild support or alimo	ny?			
YES	NO	Is a Domestic	Violence l	Protective Order in e	ffect now?			
YES	NO	Is there an active Child Protective Services (CPS) investigation of the children or was an investigation conducted in the last year prior to filing this action?						
I am pro	ceedin	g without an a	ttorney.					
OR								
I have an	attorr	ney. (Complete	e attorney i	nformation below.)				
Attorney	Name):						
Address:								
Dated: _				Sign	gnature			
	Address State / Zip Number Security Ame Asia Unk YES YES YES I am pro OR I have an Attorney Firm: Address: Telephor	DNDENT:	Co Answer: Type of ESPONDENT'S IDENTIFY Address State / Zip Code Number Security Number American Indian/Alaskan Asian or Pacific Islander Unknown YES NO Is either party YES NO Is a Domestic Islander investigation of the complete of the compl	ONDENT: Co Answer: Type of Service: ESPONDENT'S IDENTIFYING INFO Address State / Zip Code Number Date of American Indian/Alaskan Native Asian or Pacific Islander Unknown YES NO Is either party seeking che YES NO Is a Domestic Violence In the party seeking che YES NO Is there an active Child Investigation conducted In am proceeding without an attorney. OR I have an attorney. (Complete attorney in the party Name: Firm: Address: Telephone:	ONDENT: Type of Service: ESPONDENT'S IDENTIFYING INFORMATION Address State / Zip Code Male / Female Number Male / Female Number Date of Birth American Indian/Alaskan Native Hispanic Asian or Pacific Islander Black Unknown White YES NO Is either party seeking child support or alimo YES NO Is a Domestic Violence Protective Order in e YES NO Is there an active Child Protective Services (investigation conducted in the last year prior I am proceeding without an attorney. OR I have an attorney. (Complete attorney information below.) Attorney Name: Firm: Address: Telephone: Dated:			