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

IN RE THE ☐ MARRIAGE ☐ C☐ SUPPORT OF:	TVIL UNION□ CUSTOI	DY						
PETITIONER								
AND								
		CALI	ENDAR:					
RESPONDENT	1, , , , , , , , , , , , , , , , , , ,							
	FAMILY SUPPO	RT AFFIDAVIT						
of an order for the payment of chi	ld support and/or mainten not present, both Part I an	ance. Both parties may	ch contains an initial or modification use one form or they may complete pleted by the party who is present to					
PART I. To Be Completed by Cu	stodial Parent							
Full Name	Date of Birth							
Residential Address								
			Zip					
Mailing Address (if different)								
Social Security No.	Home phone (	v	Vork phone ()					
Employer								
Address								
			Zip					
Driver's License No. (Illinois)	Dr	iver's License No. (other state)						
Child(ren) covered by Order For	Support:							
Full Name(s)	<u>Sex</u>	Date of Birth	Social Security No.					
Child (ren) receiving Public Assist								
If yes, give case number:								
Title IV-D Program (Yes or No)								
If yes, give case number			See Reverse Side					

PART II. To Be Completed by No	on-Custodial Parent							
Full Name	Date of Birth							
Residential Address								
City					Zip			
Mailing Address (if different)								
Social Security No.						)		
			Telephone()					
Address					\			
City					Zip			
Occupation						***************************************		
Height:Weight:								
Race:Birt								
Driver's License No. (Illinois)								
Father's Name (last, first)								
Mother's Name (maiden, first)								
Military Service?						7		
*A party shall report to the Clerk (pursuant to 750 ILCS 5/505.3 with	in five (5) business c	of Co lays o	ok Cou of the ch	nty changes in inf ange.	ormation requ	ired to be disclosed		
Under penalties provided by low p			CATIO		C22) Th			
Under penalties provided by law pe certifies that he/she knows the stat specifically stated to be on informa them to be true.	ements set forth in t	this de	ocumen	t are true and cor	rect, except as	to matters therein		
Custodial Parent	Date		Non-Custodial Parent			Date		
	* *	*	*	*				
Attorney for Custodial Parent		<del></del>	Attorn	ney for Non-Custo	odial Parent			
Atty. No.:								
Atty. Name:		<del></del>						
Atty. for:								
Address:								
City/State/Zip:		***************************************						
Telephone:								