

STATE OF VERMONT

SUPERIOR COURT

FAMILY DIVISION

Unit

Case No. \_\_\_\_\_

INFORMATION SHEET

Plaintiff Information

Name: \_\_\_\_\_ DOB: \_\_\_\_\_
Street Address: \_\_\_\_\_
Apt. or P.O. Box # \_\_\_\_\_
City/State/Zip: \_\_\_\_\_
Home/Cell Phone: \_\_\_\_\_
Work Phone: \_\_\_\_\_
Email Address: \_\_\_\_\_

Defendant Information

Name: \_\_\_\_\_ DOB: \_\_\_\_\_
Street Address: \_\_\_\_\_
Apt. or P.O. Box # \_\_\_\_\_
City/State/Zip: \_\_\_\_\_
Home/Cell Phone: \_\_\_\_\_
Work Phone: \_\_\_\_\_
Email Address: \_\_\_\_\_

Check if this form is being filed by OCS.

1. I receive Public Assistance.

(PUBLIC ASSISTANCE from Department of Economic Services (such as Reach-Up, Dr. Dynasaur, Medicaid, Post Secondary Education Stipend (PSE)).

2. ASSISTANCE FROM THE OFFICE OF CHILD SUPPORT (OCS)

To request assistance from OCS, you must either:

1) complete the application found here Child Support Services | Department for Children and Families or

2) request a paper copy of the application from court staff and file the completed application prior to any court hearing or conference. The OCS Customer Service Unit is available for questions at 1-800-786-3214 or OCSCSU@vermont.gov.

I receive assistance from OCS.

The other party receives assistance from OCS (leave this box blank if you are unsure).

3. OTHER FAMILY/JUVENILE/PROBATE COURT PROCEEDINGS

None

Cases involving yourself, the other party and/or your children (list below):

Table with 3 columns: Name of Court, County, State. Includes three rows of blank lines for entry.

For Family Court Staff

Filing Fee Paid \$ \_\_\_\_\_ Service Fee Paid \$ \_\_\_\_\_ Receipt # \_\_\_\_\_ IFP? \_\_\_\_\_