

Dependent Information Relating to Dissolution for Keffer Barnhart LLP

Dependent One:

Full Legal Name: _____

Nickname: _____

Date of Birth: _____

Age: _____

Resides with which Parent: _____

Current location of Residence: _____

Current Custody Arrangement: _____

Current Educational Institutions: _____

Yearly Cost: _____

Other Childcare Arrangements: _____

Extraordinary Medical Conditions: _____

Desired Custody Arrangement: _____

Dependent Two:

Full Legal Name: _____

Nickname: _____

Date of Birth: _____

Age: _____

Resides with which Parent: _____

Current location of Residence: _____

Current Custody Arrangement: _____

Current Educational Institutions: _____

Yearly Cost: _____

Other Childcare Arrangements: _____

Extraordinary Medical Conditions: _____

Desired Custody Arrangement: _____

Dependent Three:

Full Legal Name: _____

Nickname: _____

Date of Birth: _____

Age: _____

Resides with which Parent: _____

Current location of Residence: _____

Current Custody Arrangement: _____

Current Educational Institutions: _____

Yearly Cost: _____

Other Childcare Arrangements: _____

Extraordinary Medical Conditions: _____

Desired Custody Arrangement: _____

