

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY COURT
Domestic Relations Branch**

PRINT PLAINTIFF'S NAME

PLAINTIFF,

v.

DR _____

PRINT DEFENDANT'S NAME

DEFENDANT.

**ATTACHMENT C
REQUIRED INFORMATION FOR CHILD SUPPORT**

I, _____, am the PLAINTIFF in this case.
PRINT YOUR NAME DEFENDANT

1. My spouse and I have the following child(ren) together (through birth or adoption) who are under the age of 21:

Child's Name	Sex	Address	Date of Birth

2. The other parent has the legal obligation to contribute to the support of our eligible child(ren), including any adult disabled child(ren).

3. I state the following about Temporary Assistance to Needy Families: [CHECK ONE]

- I am currently receiving Temporary Assistance to Needy Families (TANF).
- I am *not* currently receiving Temporary Assistance to Needy Families (TANF).

4. I state the following about Medicaid and DC Healthy Families: [CHECK ONE]

- I am currently receiving Medicaid and/or DC Healthy Families.
- I am *not* currently receiving Medicaid and/or DC Healthy Families.

5. I state the following about child support: [CHECK ONE]

- There is a child support case or child support order:

NAME & LOCATION OF COURT

CASE NUMBER

NATURE OF PROCEEDING

- There is no child support case or child support order.

Respectfully Submitted,

SIGN YOUR NAME