



# The Family Court of the State of Delaware

## INFORMATION SHEET - PLEASE PRINT

The date you file the form

Enter the file number if you know it, if not, leave blank

Date: 12/13/17 File No.: CN-9999

Please fill in A to M pertaining to you the Applicant/Petitioner. (For additional petitioners use additional sheets)  
PLEASE PRINT CLEARLY

A. Name: Anne C. Smith  
 B. Address: 101 Oak Street, Apt. 123  
 City/State/Zip: Dover, DE 19901  
 C. Phone – Home: 302-555-1111 Work: 302-555-9999 Cell: 302-999-8888  
 D. Email Address: Anne.C.Smith@example.com

Each Petitioner must complete a separate form. Complete all information on the form.

I authorize ← If you check this box, you are authorizing the Court to send you notices by email. You will not receive notices in regular mail. address.\* instead of to my mailing address.\*

\*Please note that if you checked the email authorization box, all orders in your pending civil cases in Family Court will be sent in an encrypted email via Egress to the email address provided and will not be mailed to your physical address. For information on how to receive encrypted emails through Egress, please visit <https://judicial.state.de.us/courtdox/Download.aspx?id=94888&court=readonly>.

E. Employer & Address: ABC Child Care Center  
500 Pine Street  
Dover, DE 19904

Hours/Shift Monday - Friday 7:00am - 5:00pm

F. Social Security No.: 000-00-000 G. Date of Birth: 2/3/1986

H. Place of Birth (City & State): Wilmington, DE

I. Sex: F Race: BR Height: 5ft 9 Weight: 130 Hair: Brown Eyes: Blue

Marks/Scars/Tattoos: N/A

J. Type of motor vehicle operated by you: Honda Accord

K. Driver's License No.: 1234567 State of Issue: DE Expiration Date: 2/3/2020

L. Your relationship to the Defendant/Respondent: Sister

M. Attorney: N/A

Please fill out the information below in reference to the child(ren) who are involved.

### Children

| Name                   | Relationship  | Sex      | Race         | D.O.B.            | SSN                | Birthplace<br>City & State |
|------------------------|---------------|----------|--------------|-------------------|--------------------|----------------------------|
| <u>Douglas Harding</u> | <u>Nephew</u> | <u>M</u> | <u>White</u> | <u>10/14/2012</u> | <u>987-65-4321</u> | <u>Newark, DE</u>          |
|                        |               |          |              |                   |                    |                            |
|                        |               |          |              |                   |                    |                            |
|                        |               |          |              |                   |                    |                            |
|                        |               |          |              |                   |                    |                            |
|                        |               |          |              |                   |                    |                            |

**Please fill in N to AC pertaining to the Defendant/Respondent. (For additional respondents use additional sheets)**

N. Defendant/Respondent is a: (Check One)  **ADULT**  **JUVENILE**

O. Name: Michelle Jones

P. Address: 6 Walnut Street - APT D  
 City/State/Zip: Newark, DE 19711

Q. Phone – Home: N/A Work: NA Cell: 302-222-3333

R. Email Address: MichelleJones@example.com

S. Employer & Address: N/A

Hours/Shift N/A

T. Social Security No.: Unknown U. Date of Birth: 5/1/1989

V. Place of Birth (City & State): Wilm., DE

W. Relationship to Child:  Not Applicable  Mother  Father  Relative  Non-Relative  
 Other (Please Describe): \_\_\_\_\_

X. Sex: F Race: BR Height: 5 ft Weight: 130 Hair: Brown Eyes: Brown  
 Marks/Scars/Tattoos: Hello Kitty Tattoo upper right arm

Y. Driver's License State & No.: Unknown Z. Type of vehicle operated by Defendant/Respondent: Ford - Pickup

AA. Parent's Name (if a juvenile): N/A

AB. Time when Respondent is usually home: Unknown

**You must complete a separate form for each Defendant/Respondent.**

**AC. Additional information about Respondent that may aid the process server in locating him/her to serve petition:**

If you are unable to locate the respondent at her residence, she spends a lot of time with her boyfriend at 775 Spruce Street in Middletown, DE 19765

**List places where the Respondent spends time other than at home. The more information the better.**

**DIRECTIONS TO RESPONDENT'S RESIDENCE**

Home: West on Talbot, right on Walnut, brown apartment building #6, APT D

Boyfriend: 896 So to 301, turn left, to Spruce. White house on left.

**Write directions to each address listed on this form to make sure that the process server can locate the Respondent.**