Divorce with Children

Go to www.legalaidofnebraska.org/node/418- Click on "Divorce with Children automated court forms"

In order to type in your divorce paperwork online, you will need the following information at the computer with you:

For the "Complaint for Dissolution": County where you will file divorce	
Wife full name	
Address, City, State, County Former name (if changed and want back)	
Husband full name Address, City, State, County	
Former name (if changed and want back)	
Date, City, State of Marriage	
Restraining/protections orders: Court ordering, case number(s), date(s)	
How many children The name(s) & birth date(s) of child(ren) you and your spouse have	
	he children have lived with for the past 5 years
If you have been a party in another proceed	ling concerning custody of/visitation with the children
Case number Determination date	
If there is currently a proceeding which coul Name of the court	d affect this action
Case number Determination date	
Determination date	
If any one else has had custody/claim to ha Full name of each person Full address of each person	ve custody

	ction orders, or criminal no-contact orders
Type of order	
Name of court	
Case number	
Date of each order	
Person getting custody	
Person getting visitation	
Confidential Party Information (2 form	s and information in addition to above):
Case number	· · · · · · · · · · · · · · · · · · ·
(Assigned by Clerk at counter)	
Wife phone	
Employer	
Employer address	
Health insurance	
Policy number	
Address	
Social Security Number	
Husband phone	
Employer	
Employer address	
Health insurance	
Policy number	
Address	
Social Security Number	
Social Security Numbers of	
Children under 18, born during the	
marriage	
mamage	
	ourt form, complete as much as possible):
Husband Current Residence	
Place of Birth	
Date of Birth	
Financial Affidavit for Child Support (a	additional information combined with above):
If currently an order for support for minor	· children
Name of the court	
Case number	
Amount of support	
Number of children	
Number of children	
Name of your employer	
Gross monthly income	
If per hr, amount/# of hrs	
If per mo, amount/bonuses	

Name of spouse employer Gross monthly income If per hr, amount/# of hrs If per mo, amount/bonuses	
If you made more money than currently making Name of past employer Gross monthly income If per hr, amount/# of hrs If per mo, amount/bonuses	
If spouse made more money than currently making Name of past employer Gross monthly income If per hr, amount/# of hrs If per mo, amount/bonuses	
Amount you pay for health insurance per month for children ONLY	
Amount spouse pays for health insurance per month for children ONLY	
Amount you contribute to retirement acc. Amount spouse contributes to retire. acc.	
Number of other children you support, if any Birthdates	
Method of support Name of the court, if ordered Case number Amount	
Name of other parent, if not ordered Parent's gross monthly income	
Number of other children spouse supports, if any Birthdates	
Method of support Name of the court, if ordered Case number	
Amount Name of other parent, if not ordered Parent's gross monthly income	