	STATE OF HAWAI'I EXHIBIT PERTAINING TO		CASE NUMBER			
	FAMILY COURT	•	CHILD CARE, AND	FC-	NO.	
	THIRD CIRCUIT	CHILD CUSTOD	Y PROCEEDINGS	10-	110.	
	PREPARER (NAME, ADDRESS AND PHONE NO.)					
			Name:			
		Plaintiff,				
	VS.		Address:			
		Defendant.	Phone No.:			
I.	MARRIAGE INFORMATION				YES	NO
	Are you presently separate	d?				
	If yes, date separated:					
	2. Have you had contact with your spouse at any time since your separation?					
	If so, how frequently?					
	Reasons for contacts:					
	3. What is your present relation	onship?   Good	□ Fair □ Poor			
II.	COUNSELING INFORMATION	I				
	1 Have you or your shouse r	eceived marriage counseli	na services?			
	<ol> <li>Have you or your spouse received marriage counseling services?</li> <li>If so, name of person/agency providing the service:</li> </ol>					
	Give approximate dates and numbers of interview:					
	Date(s): Number of Interviews:					
	2. Did your spouse participate	e in these sessions?				
	3. What do you feel is the basic problem in your marriage breakdown?					
	4. Do you wish counseling?					
III.	INFORMATION ON CARE OF	CHILDREN:				
	LIVING ARRANGEMENTS: (i	nclude type of house, rent	/own, number of rooms, nu	ımber of occur	oants)	
	LIVING ARRANGEMENTS: (include type of house, rent/own, number of rooms, number of occupants)					
	SUPERVISION: Give details of	of care of children if you ar	re employed and/or after so	chool care:		

	EXPENSES:				
		YES	NO		
	CUSTODY: Do you feel custody will be an issue? If yes, give NAMES OF CHILDREN whose custody is disputed and why you feel that you, rather than the other party, should have custody of the children:				
	VISITATION: What are your feelings about the children's visits with other parent?				
	What are your plans for visitation IF YOU DO NOT have custody?				
	What other activity of yours makes you feel your having custody would be in the children's best interest?				
	What activity of your spouse makes you feel it would be in the children's best interest for your spouse to have custody?				
IV.	AGENCY INFORMATION: If you or a member of your family are now active or have been known to any of the following agencies, please indicate the year of last contact with the agency:				
	1. Dept. of Social Services & Housing       2. Adult Probation         3. Family Court       4. Mental Health Clinic         5. Other (Name)       —				
	Are you willing to have the agency/person release information to this court? Indicate anyone the court officer may contact who you feel will provide corroboration or information that the court may need:				
V.	INFORMATION REQUIRED FOR CUSTODY:				
	Child(ren)'s present address:				
	Places where the children have lived within the last five years:				
	Address:				
	Address:				

## **EXHIBIT PERTAINING TO CONCILIATION, CHILD CARE AND CHILD CUSTODY PROCEEDINGS** (PAGE 2)

	NAME and PRESENT ADDRESS of persons with whom the CHILD(REN) has/have lived during that period:							
	NAME: ADDRESS:							
	NAME: ADDRESS:							
	ОТ	THER CUSTODY PROCEEDINGS:		YES	NO			
	1.		ed (as a party, witness, or in any other capacity) in any other litigation d(ren)'s custody in this or any other state?					
	2.	Do you have informa of this or any other s	ation of any custody proceeding concerning the children pending in a court tate?					
	3.		person not a party to the proceedings who has physical custody of the o have custody or visitation rights with respect to the child(ren)?					
	IF YOUR ANSWER TO ANY OF THE ABOVE QUESTIONS IS YES, PLEASE PROVIDE THE FOLLOWING:							
	1.	The nature of your pa	articipation in other proceedings:					
	2.	The time, place, title	of this court, case number and outcome, if any, of the other proceedings:					
	3.	The names of the other persons involved in the other proceedings and their relationship to you:						
	4.	4. Copies of any court orders in your possession relating to custody/visitation.						
THE UNDERSIGNED SOLEMNLY AND SINCERELY DECLARES, UNDER PENALTY OF PERJURY, THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION AND BELIEF.								
ATE			SIGNATURE					