# INFORMATION ON SUIT AFFECTING THE FAMILY RELATIONSHIP (EXCLUDING ADOPTIONS)

SEC	HORT GENERAL IN	IFORMATIC	M (KEQUIKEL	))	STAT	E FILE NU	MBER	Remarks of the confliction and the con-	
1a. COUNTY			1b. COL	1b. COURT NO.					
1c. CAUSE NO.			1d. DAT	1d. DATE OF ORDER (mm/dd/yyyy)					
2. TY	PE OF ORDER (CHEC	K ALL THAT A	APPLY):						
DIVORCE/ANNULMENT WITH CHILDREN (Sec. 1,2 and 3)  DIVORCE/ANNULMENT WITHOUT CHILDREN (Sec 1 and 2)									
_ ES (Cour	TABLISHMENT OF CO t Order Establishing Pate	URT OF CON rnity, Conserva	ITINUING JURIS atorship, Child Suj	DICTIO	ON (SEC 1 A Termination	ND 3) n of Parent	al Rights)		
(PRO	IANGE IN THE NAME C VIDE PRIOR AND NEW NAM	NE OF CHILD IN	SECTION 3)						
	ANSFER OF COURT O						,		
	NSFER TO: COUNTY_		OURT NO.	ST	ATE COU	RT ID#			
3a. NAME OF ATTORNEY FOR PETITIONER  3b. TELEPHONE NUMBER (including area code)									
3c.	CURRENT MAILING ADDRESS	S (STREET AND NU	IMBER OR P.O BOX, O	CITY, STA	TE, ZIP)				
SEC	TION 2 (IF APPLICAB	LE) REPORT	OF DIVORCE O	R ANN	ULMENT	OF MARR	IAGE		
PETITIONER	4. NAME (FIRST MIDDLE LAST SUFFIX)							5. MAIDEN LAST NAME (NAME BEFORE 1 <sup>ST</sup> MARRIAGE)	
	6. PLACE OF BIRTH (CITY AND STATE OR FOREIGN COUNTRY)				7. RACE			8. DATE OF BIRTH (mm/dd/yyyy)	
	9. USUAL RESIDENCE STREET NAME & NUMBER CITY STATE						TATE	ZIP	
RESPONDENT	10. NAME (FIRST MIDDLE LAST SUFFIX)  11. MAIDEN LAST NAME (NAME BEFORE 1 <sup>ST</sup> MARRIAGE)								
	12. PLACE OF BIRTH (CITY AND STATE OR FOREIGN COUNTRY) 13.					13. RACE		14. DATE OF BIRTH (mm/dd/yyyy)	
	15. USUAL RESIDENCE (STREET AND NUMBER CITY, STATE, ZIP)								
16. NUMBER OF MINOR CHILDREN 17. DATE OF MARRIAGE (mm/dd/yyyy) 18. PLACE OF MARRIAGE (CITY AND STATE OR FOREIGN COUNTRY)									
SECTION 3 (IF APPLICABLE) CHILDREN AFFECTED BY THIS SUIT									
	19a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX)								
CHILD 1	19b. DATE OF BIRTH (mm/dd/yyyy) 19c. SEX				19d. BIRTHPLACE (CITY, COUNTY AND STATE)				
	19e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) — IF APPLICABLE								
	20a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX)								
CHILD 2									
	20b. DATE OF BIRTH (mm/dd/yyyy) 20c. SEX			20d. BIRTHPLACE (CITY, COUNTY AND STATE)					
	20e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) — IF APPLICABLE								
	21a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFDX)								
CHILD 3	21b. DATE OF BIRTH (mm/dd/yyyy) 21c. SEX			21d. BIRTHPLACE (CITY, COUNTY AND STATE)					
	21e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) — IF APPLICABLE								
A[	L DDITIONAL CHILDREN LISTED OF	N BACK OF THE FO	DRM.						
I CERTIFY THAT THE ABOVE ORDER WAS GRANTED ON THE DATE AND PLACE AS STATED.  SIGNATURE OF THE CLERK OF THE COURT									

WARNING: This is a governmental document. Texas Penal Code, Section 37.10, specifies penalties for making false entries or providing false information in this document. VS-165 REV 07/2017

ADDITIONAL CHILDREN AFFECTED BY THIS SUIT FROM SECTION 3 (IF APPLICABLE) 23a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX) 23b. DATE OF BIRTH (mm/dd/yyyy) 23c. SEX 23d. BIRTHPLACE (CITY, COUNTY AND STATE) 23e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) - IF APPLICABLE 24a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX) 24b. DATE OF BIRTH (mm/dd/yyyy) 24c, SEX 24d. BIRTHPLACE (CITY, COUNTY AND STATE) 24e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) -- IF APPLICABLE 25a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX) 25b. DATE OF BIRTH (mm/dd/yyyy) 25c SEX 25d. BIRTHPLACE (CITY, COUNTY AND STATE) 25e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) - IF APPLICABLE

# Instructions for Completing the Suit Affecting Parent Child Relationship Form GENERAL REQUIREMENT:

All divorces/annulments (with or without children) and all suits affecting the parent-child relationship must be reported through the clerk of the court to the State Vital Statistics Unit (VSU).

Consolidated reporting by petitioners, attorneys, and the courts is designed to make mandatory reporting more efficient, timely, and improve the quality of reporting. However, this reporting system is only as good or timely as you make it; therefore, your attention in completing and filling this report is critical.

Legal basis for this reporting is contained in Health and Safety Code §194.002 and Texas Family Code §\$108.001-.002 and 108.004.

For information concerning reporting or questions about this form, contact field services at <u>fieldservices@dshs.texas.gov</u> or by phone at 512-776-3010.

## The VSU-165 form must be printed double-sided (one sheet not two).

For information on the court of continuing jurisdiction of a child, contact VSU at (888) 963-7111 ext. 2529. Inquiries should be addressed to VSU, 1100 West 49th Street, Austin, Texas, 78756-3191; inquiries may also be faxed to (512) 776-7164.

# SECTION 1 GENERAL INFORMATION (REQUIRED)

This section must be completed for each report filed.

- 1a d. Enter the required information to identify the court proceeding.
- 2. Check the type of suit being reported. This determines also which sections of the form must be completed. If more than one type of order applies, check all that apply. Transfers from one jurisdiction to another must be reported in this section (if court number is unknown, specify "unknown").
- 3a c. Complete the attorney information to assist in questions or follow up. If case was pro se, please enter the information of the person completing this form.

### SECTION 2 (IF APPLICABLE) REPORT OF DIVORCE OR ANNULMENT OF MARRIAGE

All divorces/annulments must be reported, even if there were no minor children. All information is required.

- 4-9. Report the Petitioner's information including maiden name (if applicable ).
- 10-15. Report the Respondent's information, including maiden name (if applicable).
- 16. Report the number of minor children affected by this divorce; if none, record "0." This number must correspond to the listing of children in Section 3.
- 17-18. Enter the date and place of the marriage being dissolved.

#### SECTION 3 (IF APPLICABLE) CHILDREN AFFECTED BY THIS SUIT

Every child affected by the suit being reported must be listed, and all items concerning that child must be completed. If more than three children are affected, check the "additional children listed on back of form" box, and continue to list the additional children. If more than 6 children complete section 3 on another form, label it "continuation" and attached the continuation form to the original form.