

Confidential Client History

DIVORCE PROCEEDINGS

The following questionnaire is designed to help you more accurately provide information that will help us prepare court pleadings on your behalf. Please complete this form as fully and comprehensively as possible. If exact information is not known, please provide your best estimate. You may be asked at some future date to provide more precise information.

Confidential information provided on this form is protected by the attorney-client privilege and is intended for the use of your legal counsel. Any information provided in this form which is detrimental to you will not be revealed by counsel without your consent unless it is in your best interests to do so except in certain narrow and limited situations required or authorized by law. If you have any questions about the confidentiality of this information we will be pleased to answer them. Because this information is provided in confidence, we ask that your answers be as truthful, complete and accurate as possible.

Name: _____

Mailing Address: _____

Telephone: (_____) _____ - _____

Mobile: (_____) _____ - _____

Work: (_____) _____ - _____

Email: _____

Spouse's Attorney: _____

Spouse's Attorney Telephone: (_____) _____ - _____

FOR OFFICE USE ONLY

Client #: _____

Docket #: _____

ABOUT YOU

Full Name _____
(maiden name, if applicable)

Date of Birth: ____/____/ 19____ Social Security Number: _____-____-_____

Place of Birth: _____ Citizenship: _____

Home Address _____
(if different from _____
mailing address) _____

Lived at present address since _____

All home addresses for past two years:

_____ From _____ To _____
_____ From _____ To _____

Educational Background _____

Who referred you to us? _____

EMPLOYMENT

Employer _____ Telephone: (____) _____

Address _____

Job Title _____ Employed since _____

Nature of job _____

Monthly Salary:
Base _____
Gross _____
Net _____

Monthly Deductions:
FICA _____
State _____
Federal _____
Other _____

Overtime and Bonuses:
Gross _____
Net _____

Previous Employment and Dates:

SPOUSE INFORMATION

Spouse's Full Name _____
(maiden name, if applicable)

Date of Birth: ____/____/19____

Social Security Number: _____-____-_____

Spouse's Home Address _____

Home Telephone _____

Spouse's Business Telephone _____

Employer _____ Telephone: (____) _____

Address _____

Job Title _____ Employed since _____

Gross Salary _____ Overtime/ Bonus _____

MARRIAGE INFORMATION

Date of Marriage _____ Place _____

Are you and your spouse living together now? _____ If not, state date of separation _____

Where were you living at the time of the separation? _____

If separated and if all of your addresses since separation are not listed in #1, please list other here.

_____ From _____ To _____

_____ From _____ To _____

Do you have an interest in reconciliation? _____ Does your spouse (as far as you know)? _____

Please give dates and names of any personal or marital counselors seen by you or your spouse.

Do you anticipate a dispute about custody of the children?

Prior Marriages: Please include names of all prior spouses, how, when and where prior marriages terminated, and provide copies of relevant court orders and separation agreements.

You: _____

Spouse: _____

CHILDREN OF THE MARRIAGE

<u>Full Name</u>	<u>Date of Birth</u>	<u>Grade</u>	<u>Living With</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List the names of any children of yourself or your spouse other than those listed above, state with whom children live, who has their legal custody and whether they have been adopted.

You: _____

Spouse: _____

If any of your children has special education needs please explain:
