

CLIENT DIVORCE INFORMATION SHEET

Client Info:

Name _____ DOB _____ SSN _____

Maiden Name _____ Race _____ Occupation _____

Address _____

Place of Birth _____ Inside city limits _____ Phone # _____

Highest Level of Education Completed _____ Are you in the Armed Forces: _____

How did you hear about our office? _____

Marriage Info:

Number of this Marriage _____ Date Previous Marriage Ended _____

How previous marriage ended _____

Date of Current Separation _____ Date of Current Marriage _____

Place of Marriage (including city, county, and state) _____

Residence at Time of Current Marriage _____

Children from Current Marriage :

Name _____ DOB _____ SSN _____

Name _____ DOB _____ SSN _____

Name _____ DOB _____ SSN _____

Address of Children for the Last Five Years:

Address _____

Address _____

Spouses Info:

Name _____ DOB _____ SSN _____

Maiden Name _____ Race _____ Occupation _____

Address _____

Place of Birth _____ Inside city limits _____ Phone # _____

Highest Level of Education Completed _____ Are you in the Armed Forces: _____

Number of this Marriage _____ Date Previous Marriage Ended _____

How previous marriage ended _____

Residence at Time of Current Marriage _____

*Please bring a complete list of all assets and debts as well as a list your current monthly expenses.