

Client Intake Form – Divorce/Parentage

Name: _____ Maiden name: _____

Soc.Sec. No.: _____ Date of birth: _____

Place of birth: _____ State of birth: _____

Driver's license no.: _____

Address: _____

Home phone: _____ Work phone: _____

Marital Information

Date of marriage: _____ Place of marriage: _____

Length of marriage : _____ Prior marriages: _____

Date(s) of prior marriages: _____ Dates(s) terminated: _____

How terminated: _____ Where terminated: _____
(death, divorce, etc.) (city/county)

Money owed or owing as a result of prior marriage(s):

I (am owed/owe) child support of \$ _____ per (week/month) [circle one]

I (am owed/owe) maintenance of \$ _____ per (week/month) [circle one]

Employment Information

Occupation: _____ Employer: _____

Dates of employment: _____ Address: _____

Monthly gross income: \$ _____ Monthly net income: \$ _____

Voluntary deductions: \$ _____

Bonuses/overtime/commissions: \$ _____

Other sources of income: _____ \$ _____
(employer) (monthly earnings)

Does your employer provide health insurance? If so, what family members are covered under that plan?

Health Information

Present physical health: _____
(good, fair, poor)

Physician's name: _____

Chronic or ongoing physical ailments: _____

Present psychological health: _____

Physician/therapist/counselor: _____

Chronic or ongoing psychological ailments: _____

Educational Information

Grammar school: _____ Level completed: _____ (1 – 8)

High school: _____ Level completed: _____

College/university: _____ Level completed: _____

Postgraduate: _____

SPOUSE INFORMATION

Personal Information

Name: _____ Maiden name: _____

Date of birth: _____ Place of birth: _____

Soc.Sec. no.: _____

State of birth: _____

Driver's license no.: _____

Address: _____

Home phone: _____

Work phone: _____

Marital Information

Date of marriage: _____

Place of marriage: _____

Length of marriage: _____

Prior marriages: _____

Date(s) of prior marriage(s): _____

Date(s) terminated: _____

How terminated: _____

Where terminated: _____

(Death, divorce, etc.)

(city/county)

Money owed or owing as a result of prior marriage(s):

My spouse owes child support of \$ _____ per (week/month) [*circle one*]

My spouse owes maintenance of \$ _____ per (week/month) [*circle one*]

Employment Information

Occupation: _____

Employer: _____

Dates of Employment: _____

Address: _____

Monthly net income: \$ _____

Monthly gross income \$ _____

Voluntary deductions: \$ _____

Bonuses/overtime/commissions: \$ _____

Other sources of income: _____ \$ _____

(employer)

(monthly earnings)

Does your spouse's employer provide health insurance? If so, what family members are covered under that plan?

Health Information

Present physical health: _____
(good, fair, poor)

Physician's name: _____

Chronic or ongoing physical ailments: _____

Present psychological health: _____

Physician/therapist/counselor: _____

Chronic or ongoing psychological ailments: _____

Educational Information

Grammar school: _____ Level completed: _____ (1 – 8)

High school: _____ Level completed: _____

College/university: _____ Level completed: _____

Postgraduate: _____

CHILDREN

Children of this marriage

Name	Date of Birth	Soc.Sec. No.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

_____ \$ _____ \$ _____ \$ _____

INVESTMENT ACCOUNTS

_____ \$ _____ \$ _____ \$ _____

_____ \$ _____ \$ _____ \$ _____

_____ \$ _____ \$ _____ \$ _____

RETIREMENT ACCOUNTS

_____ \$ _____ \$ _____ \$ _____

_____ \$ _____ \$ _____ \$ _____

_____ \$ _____ \$ _____ \$ _____

LIFE INSURANCE (Face Value/Death Benefit)

_____ \$ _____ \$ _____ \$ _____

_____ \$ _____ \$ _____ \$ _____

_____ \$ _____ \$ _____ \$ _____

REAL ESTATE (Include primary residence, vacation homes, rental property, vacant land)

_____ \$ _____ \$ _____ \$ _____

_____ \$ _____ \$ _____ \$ _____

_____ \$ _____ \$ _____ \$ _____

BUSINESS INTERESTS

_____ \$ _____ \$ _____ \$ _____

_____ \$ _____ \$ _____ \$ _____

VEHICLES

Client

Year: _____ Make: _____ Model: _____

Lien holder: _____ Name of titleholder: _____

Total balance owed: \$ _____ Monthly payment: _____

Spouse

Year: _____ Make: _____ Model: _____

Lien holder: _____ Name of titleholder: _____

Total balance owed: \$ _____ Monthly payment: _____

GROUNDS

If you are currently living separate and apart from your spouse, what is the date of that separation?

Do you want a divorce? _____

Does your spouse want a divorce? _____

What actions or behavior by your spouse have caused you to seek legal advice at this time?

If you seek to file a petition for dissolution of marriage, what are the grounds on which you would proceed? (*i.e.*, mental cruelty, adultery, irreconcilable differences, etc.)

What specific conduct would constitute a basis for the grounds on which you wish to proceed?

RELIEF What are your expectations and desires regarding the division of property?

What are your immediate needs in terms of support, housing, debt assistance, injunctive relief, physical protection, custody, and support of the child/children?

Will you be seeking permanent physical custody of the child/children?

Will you be seeking maintenance (formerly known as alimony) from your spouse?

Additional notes: _____

SUPPORTING DOCUMENTS

The following is a list of supporting documents you are requested to provide. In some cases, the requested documentation may be inapplicable to your situation. In other cases, you may not have access to the information. Please provide only the documents that are applicable and available. *By providing the following papers, you will hasten the conclusion of your case as well as limit our research time and, ultimately, your total bill.* Thank you for your cooperation, and do not hesitate to contact our office with any questions regarding this list.

- 1. Tax Returns** Please furnish copies of your state and federal income tax returns for the last three years, including all schedules, W-2 forms, and 1099 forms.
- 2. Retirement Plan** Please provide a summary plan description and current statement of vested benefits for any profit-sharing plan, pension plan, Keogh, 401(k) plan, annuity, or retirement plan in which you or your spouse is a participant. Such information can usually be provided by the plan administrator and must be made available to you by your employer.

3. *Individual Retirement Account* Please provide the account number, financial institution, beneficiary, and current account balance for any individual retirement accounts (IRAs) owned by you or your spouse.
4. *Real Estate Appraisal* Please furnish any appraisal of any property owned by you or your spouse done within the last three years.
5. *Life Insurance* Please provide any term or whole life insurance policies for which you or your spouse is the owner or beneficiary. Also, provide a copy of the face sheet of all policies, including insurance company name,

insured, face amount of the policy, policy number, beneficiary, beneficiary changes, premiums, terms and conditions, cash value, and loans against the policy.
6. *Bank Accounts* Please provide copies of the most current account statements on any and all savings, checking, or other financial accounts held by you or your spouse. Such information can be obtained from the financial institution upon request.
7. *Stocks, Bonds, and Securities* Please list stocks, bonds, and securities owned by you or your spouse, including the date of purchase, purchase price, and current owner of such securities. Such information can be obtained from your investment broker.
8. *Business Interests* Please provide copies of partnership or corporate tax returns for any business in which you or your spouse has an interest. Additionally, provide balance sheets and profit/loss statements for the past three years.
9. *Estate or Trust Interest* Please provide the trust agreement, inventory, most recent annual accounting, and tax return for any trust in which you or your spouse has an interest. Additionally, provide copies of any will that establishes an interest in an estate or inheritance.
10. *Prior Marriages* Please furnish copies of any judgments for dissolution of marriage and/or marital settlement agreements for any previous divorces of you or your spouse.
11. *Written Agreements* Please provide any written agreements concerning property, support, or other matters entered into by you and your spouse. If no agreement exists, *do not* enter into any such agreement without prior consultation with this firm.
12. *Income and Expense Affidavit* Please complete the attached income and expense affidavit. Please use your best estimates as to the monthly costs of the expenses listed on the affidavit.

Those figures should be “averages” of your monthly expenses.

13. *Spouse's Income* Please furnish copies of your spouse's most recent payroll stubs, if available.

14. *Safe Deposit Box*

Please indicate the location and contents of any safe deposit box owned by you or your spouse.