

**CLIENT INFORMATION**

**Client Name:**

Address:

Phone:

D.O.B.:

Social:

Secure Email:

County of Residence:

Length of time living in this County:

Employer:

Employer Address:

Employer Phone:

Annual Salary:

\*\*\*\* PLEASE ATTACH A CURRENT PAYSTUB OR OTHER PROOF OF INCOME \*\*\*\*

**Date of Marriage:**

**Place of Marriage:**

**Approximate date of Separation:**

\*\*\*\* **Wife Maiden Name:**

\*\*\*\* Taking?

**Spouse name:**

Spouse Address:

Spouse Phone:

Spouse D.O.B.:

Spouse Social:

Spouse email:

County of Residence:

Length of time living in this County:

Employer:

Employer Address:

Employer Phone:

Annual Salary:

**Do you and your Spouse have children together? (If so, need info below & Parenting Plan information)**

Child 1 Name:

Child D.O.B.:

Child Social:

Where does child live?

How long and where else?

Where was child born?

Child 2 Name:

Child D.O.B.:

Child Social:

Where does child live?

How long and where else?

Where was child born?

Child 3 Name:

Child D.O.B.:

Child Social:

Where does child live?

How long and where else?

Where was child born?

**Do you and/or your Spouse have children from a previous relationship? Explain:**

**Do either of you receive or pay child support for children from a prior relationship? Explain:**

**Do you and/or your Spouse pay spousal support to a prior spouse? Explain:**

**Do you and/or your Spouse own real estate?**

Address:

County:

What will happen with this property?

**Is there a history of domestic abuse?**

**Is there a history or problem with drugs and/or alcohol?**

**Any Bankruptcy Issues?**

**Are either of you an active duty service member?**

**Spousal Support.** Will you be seeking? Will your spouse be seeking? Explain how you want this handled.

**Do you and/or your Spouse own Household Belongings?** If so, how will they be divided?

**Do you and/or your Spouse own Vehicles?** (List make, model, year, loan balance, and current value)

**Do you and/or your Spouse have Bank Accounts?** (List bank, type of account and estimate of balances)

Who will get each account?

**Do you and/or your Spouse have Stocks & Bonds?** Explain and who will get?

**Do you and/or your Spouse have Retirement Accounts?** Explain and who will get?

**Do you and/or your Spouse have Cash-Value Life Insurance?** Explain and who will get?

**Have you and your Spouse filed taxes for the Current Year?**

**Are there joint or individual debts that need to be addressed?** List debts and who is liable. If joint, who will be responsible or will you split the debt?

**Harassment clauses?** Is harassment a problem?

**Do you have business interests? Alone or with spouse?** If so, explain.

**What will happen with the business?**

**Who currently pays for Health Insurance?**

Responsible Party:

Employer:

Employer Address:

Employer Phone:

Insurance Company:

Insurance Address:

Insurance Phone:

Group Number/ID:

**Will child be covered on health insurance?** Whose? ID #?

**Who is paying for this legal action?**

**Shared Parenting?** Do you want this?

**Child Support:** Is there an order already? If so, provide documentation. If not, is someone seeking it?

**Parenting time:** Explain what is in place and what you want.

**Medical Expenses?** How should the children's medical expenses be handled?

**Clothing, extra costs, extracurricular?** Who will pay for these or will you split?

**Tax Exemption for children.** Who will get to claim the children?

**If a custody arrangement is in place, what is the current status?** Provide documentation, decree, etc.



**WHAT ARE YOUR GOALS IN THIS ACTION?**

**DOCUMENTS THAT MAY BE NEEDED FROM YOU:**

1. Copies of any existing court orders, decrees, or child support notices
2. Pay stubs – most recent. If you do not have paystubs, then bank statements, award letters or other proof of payment will be required.
3. Last three years tax returns
4. Last three years bank statements
5. Appraisals of Real Estate
6. Accounting of money spent during pendency of this case
7. Balances due on liabilities/debts
8. Most recent retirement plan summary
9. Health Insurance information and cost of COBRA for that plan
10. Copies of deeds
11. Copies of vehicle titles (unless in possession of other party)

**Note: There may be additional information needed based on the specifics of you case**