

REFERRED BY: \_\_\_\_\_

TODAY'S DATE: \_\_\_\_\_

**DIVORCE INFORMATION**

CLIENT'S NAME (legal name) \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS (home) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_

PHONE \_\_\_\_\_ CELL/PAGER \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME & ADDRESS OF EMPLOYER: \_\_\_\_\_ PHONE \_\_\_\_\_

PLACE OF BIRTH (city) \_\_\_\_\_ (state) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ RACE: \_\_\_\_\_

DRIVER'S LICENSE NO. \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

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SPOUSE'S NAME (legal name) \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS (home) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_

PHONE \_\_\_\_\_ CELL/PAGER \_\_\_\_\_

NAME & ADDRESS OF EMPLOYER: \_\_\_\_\_ PHONE \_\_\_\_\_

PLACE OF BIRTH (city) \_\_\_\_\_ (state) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ RACE: \_\_\_\_\_

DRIVER'S LICENSE NO. \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

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DATE OF MARRIAGE \_\_\_\_\_ PLACE OF MARRIAGE (city) \_\_\_\_\_ (state) \_\_\_\_\_

DATE OF SEPARATION \_\_\_\_\_ LENGTH OF TIME IN COUNTY \_\_\_\_\_ LENGTH OF TIME IN STATE \_\_\_\_\_

WIFE'S MAIDEN NAME \_\_\_\_\_ TO BE RESTORED? \_\_\_\_\_

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Name of Nearest Relative: \_\_\_\_\_ Phone: \_\_\_\_\_

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**CHILDREN OF THE MARRIAGE**

NAMES	SEX	D/BIRTH	PLACE OF BIRTH	PRESENT RESIDENCE

ARE YOU ASKING FOR CUSTODY? Yes \_\_\_\_\_ No \_\_\_\_\_ DO YOU WANT CHILD SUPPORT? Yes \_\_\_\_\_ No \_\_\_\_\_

DO YOU WANT ALIMONY? Yes \_\_\_\_\_ HOW MUCH? \_\_\_\_\_ No \_\_\_\_\_

DO YOU NEED A RESTRAINING ORDER? Yes \_\_\_\_\_ No \_\_\_\_\_

(Check all that apply)

- \_\_\_\_\_ Harassing & Harming
- \_\_\_\_\_ Interfering with children
- \_\_\_\_\_ Selling community items
- \_\_\_\_\_ Interfering with car
- \_\_\_\_\_ Coming about home/work
- \_\_\_\_\_ Alimony and/or child support
- \_\_\_\_\_ Withdrawing funds
- \_\_\_\_\_ Sworn Inventory
- \_\_\_\_\_ Financial Records

GROUNDS FOR DIVORCE \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE LIST ALL MAJOR COMMUNITY PROPERTY :**

Own your home: \_\_\_\_\_ Rent: \_\_\_\_\_

Other Real Estate: \_\_\_\_\_ If yes, please list the address and where located:

\_\_\_\_\_  
\_\_\_\_\_

**VEHICLES:**

Year: _____	Make: _____	Whose Possession: _____
Year: _____	Make: _____	Whose Possession: _____
Year: _____	Make: _____	Whose Possession: _____
Year: _____	Make: _____	Whose Possession: _____

**BOATS, MOTORCYLES, CAMPERS, ETC:**

Year: _____	Make: _____	Whose Possession: _____
Year: _____	Make: _____	Whose Possession: _____
Year: _____	Make: _____	Whose Possession: _____
Year: _____	Make: _____	Whose Possession: _____

**ARE YOU ENTITLED TO RETIREMENT BENEFITS?** Yes \_\_\_\_\_ No \_\_\_\_\_

IF SO, PLEASE DESCRIBE: (i.e. Employment, Military, etc.) \_\_\_\_\_

NAME OF PLAN: \_\_\_\_\_

**IS YOUR SPOUSE ENTITLED TO RETIREMENT BENEFITS?** Yes \_\_\_\_\_ No \_\_\_\_\_

PLEASE DESCRIBE: (i.e. Employment, Military, etc.) \_\_\_\_\_

NAME OF PLAN: \_\_\_\_\_