

We know your time is extremely valuable to you. Therefore filling out this form prior to, and bringing it with you to your appointment, allows for more time to discuss the particulars of your case during your consultation and less time spent on gathering personal information on the parties involved. Please take a few moments to fill out the following form with as much information as possible and bring it with you to your appointment. Thank you!

Type of case:       Dissolution                       Legal Separation                       Post Dissolution

Has your case been filed with any Court already?    no    yes   Cty/St \_\_\_\_\_

Is there a hearing date & time currently scheduled?    no    yes   If so, Date/Time \_\_\_\_\_

Married: \_\_\_\_/\_\_\_\_/\_\_\_\_   Separated: \_\_\_\_/\_\_\_\_/\_\_\_\_   If Divorced, date finalized: \_\_\_\_/\_\_\_\_/\_\_\_\_

Would you like the restoration of maiden/previous name?    no    yes. If so, name: \_\_\_\_\_

Is there a Pre-Nuptial Agreement?    no    yes

**Personal Information:**

\_\_\_\_\_  
Your Name (include maiden name)

\_\_\_\_\_  
Spouse's Name (include maiden name)

\_\_\_\_\_  
Your Home Address

\_\_\_\_\_  
Spouse's Home Address

\_\_\_\_\_  
Your City, State, Zip                      County

\_\_\_\_\_  
Spouse's City, State, Zip                      County

\_\_\_\_\_  
Your Home Phone

\_\_\_\_\_  
Spouse's Home Phone

\_\_\_\_\_  
Your Cell Phone

\_\_\_\_\_  
Spouse's Cell Phone

\_\_\_\_\_  
Your email address

\_\_\_\_\_  
Spouse's email address

\_\_\_\_/\_\_\_\_/\_\_\_\_      -\_\_\_\_-\_\_\_\_  
Your DOB                      Your SSN

\_\_\_\_/\_\_\_\_/\_\_\_\_      -\_\_\_\_-\_\_\_\_  
Spouse's DOB                      Spouse's SSN

**Children (please use back page if needed):**

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
Name of child/Sex of child      DOB      Social Sec #      Daycare/ School      Cost

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
Name of child/Sex of child      DOB      Social Sec #      Daycare/ School      Cost

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
Name of child/Sex of child      DOB      Social Sec #      Daycare/ School      Cost

Are you or your Spouse currently pregnant?    Yes    No   If yes, due date? \_\_\_\_\_

Do you or your Spouse have any children from a previous relationship?    Yes    No

**Employment Information:**

\_\_\_\_\_  
Your Employer's Name

\_\_\_\_\_  
Spouse's Employer's Name

\_\_\_\_\_  
Your Employer's Address

\_\_\_\_\_  
Spouse's Employer's Address

\_\_\_\_\_  
Your Employer's City, State Zip

\_\_\_\_\_  
Spouse's Employer's City, State ZIP

\_\_\_\_\_  
Position How long?

\_\_\_\_\_  
Position How long?

\$\_\_\_\_\_ \$\_\_\_\_\_ \$\_\_\_\_\_  
Wkly gross pay commissions bonuses

\$\_\_\_\_\_ \$\_\_\_\_\_ \$\_\_\_\_\_  
Wkly gross pay commissions bonuses

Employer health Insurance available  yes  No

Employer health Insurance available  yes  No

**Real Estate (please use back page if needed):**

Do you and/or your spouse currently own any real estate?  No  yes If yes, please answer questions below.

1. \_\_\_\_\_  
Street City, State, Zip County Deeded to H/W/Joint

\$\_\_\_\_\_ \$\_\_\_\_\_  
Mortgage Balance Mthly payment Mortgage Company name, address

2. \_\_\_\_\_  
Street City, State, Zip County Deeded to H/W/Joint

\$\_\_\_\_\_ \$\_\_\_\_\_  
Mortgage Balance Mthly payment Mortgage Company name, address

Below, list any liens, 2<sup>nd</sup> mortgages, Home Equity loans, or lines of credit on any of the properties listed above. Reference property by number from above **(please use back page if needed)**.

\_\_\_\_\_  
No. Balance Payment Lien Holder/Financial Institution name, address H/W/Joint

\_\_\_\_\_  
No. Balance Payment Lien Holder/Financial Institution name, address H/W/Joint

\_\_\_\_\_  
No. Balance Payment Lien Holder/Financial Institution name, address H/W/Joint

\_\_\_\_\_  
No. Balance Payment Lien Holder/Financial Institution name, address H/W/Joint

