

INTAKE SHEET FOR DIVORCE

Please answer all questions honestly and completely so that we may check for any potential conflicts of interest and so that we may properly evaluate your case. ALL INFORMATION CONTAINED HEREIN IS KEPT STRICTLY CONFIDENTIAL.

TODAY'S DATE: _____ You are the: [] Husband [] Wife

Are there minor children of this marriage? _____

Is anyone accompanying you to the consultation? _____ If yes, please give names of each person and your relationship to each: _____

***Please be aware that by allowing a third party to sit in on your legal consultation, you are waiving any attorney-client privilege that may otherwise exist.*

I. PERSONAL INFORMATION

Your full name: _____

Maiden Name (if applicable): _____

Name you prefer to be called: _____

Phone -Home: _____ wk: _____ cell: _____

Fax #: _____ E-mail address: _____

Your home address: _____

_____ County: _____

This residence is: [] permanent [] temporary – how long? _____

Others currently residing in same household, and relationship of each: _____

May we send correspondence to you at the address listed above? [] YES [] NO

*** If no, where?** _____

Date of Birth: _____ Social security #: _____

DL # and State: _____ Place of birth: _____

Occupation: _____ Employer: _____

Employer address: _____

How long at that job? _____ This job is: [] full time [] part time [] temporary

You are paid: [] Salary [] hourly wage [] commission [] other: _____

Do you receive bonuses? _____ If yes, how often? _____

How are you paid (every week, every other Friday, etc.): _____

Average gross monthly income from job: _____

Work schedule: _____

Are you required to travel for work? _____ If yes, how often? _____

List income from all other sources (disability, rental income, royalties, etc.): _____

Professional licenses or degrees held: _____

Emergency Contact(s):

1. Name: _____ Phone: _____

Relationship: _____

2. Name: _____ Phone: _____

Relationship: _____

II. INFORMATION ABOUT YOUR SPOUSE:

Full Name: _____

Maiden Name (if applicable): _____

Date of birth: _____ Place of birth (city, state): _____

Phone - home: _____ work: _____ cell: _____

E-mail address: _____ fax #: _____

Residence Address: _____

_____ County: _____

Mailing address (if different from above): _____

Others currently residing in same household with him/her: _____

SS #: _____ DL # and State: _____

Occupation: _____ Employer: _____

Employer's address: _____

How long at that job? _____ This job is: [] full time [] part time [] temporary

Spouse is paid: [] Salary [] hourly wage [] commissions [] other: _____

Does he/she receive bonuses? _____ If yes, how often? _____

Average gross monthly income from job: _____

Income from all other sources (disability, investments, royalties, etc.): _____

Describe his/her work schedule (days of week, times, etc.): _____

Is he/she required to travel for work? _____ If so, how often? _____

Professional licenses or degrees held: _____

III. GENERAL INFORMATION ABOUT THE MARRIAGE:

Do you feel that you or your children are in immediate physical danger? _____

Which terms of the divorce will your spouse most likely contest? _____

Are there currently minor children from this marriage? [] NO [] YES If yes, how many: _____

Date of Marriage: _____ Date of Separation: _____

Place of Marriage (city, state): _____

Is this a common law marriage? [] NO [] YES [] Not sure

Is there a pending Divorce Petition at this time? [] NO [] YES – date filed: _____

If yes, you are the [] Petitioner [] Respondent

Are Temporary Orders currently in place? [] NO [] YES – date: _____

Did you sign a prenuptial or postnuptial agreement? [] NO [] Yes – Date: _____

Previous Marriages? _____

Are you and/or your spouse currently in a bankruptcy? _____

If yes, when will the bankruptcy be completed? _____

IV. BACKGROUND INFORMATION (Please check all that apply)

If you need additional space, feel free to use the back of this sheet, and indicate such.

	You	Spouse
1. History of drug or alcohol abuse Explain:		
2. Convicted of a felony Explain:		
3. Convicted of DUI or DWI Explain:		
4. Committed family violence in the past Explain:		
5. Has committed adultery in the past Explain:		
6. Currently in romantic relationship with person other than spouse Explain:		
Has a sexually transmitted disease Explain:		
8. Has been investigated by CPS Explain:		

9. Has lost custody of child or children in the past Explain:		
10. Mental or Emotional problems Explain:		
11. Has problem with or addiction to pornography Explain:		

V. JURISDICTION

	Yourself	Your Spouse	Your children
County of residence:			
How long in that county?			
How long in Texas?			
Prior county / state:			
How long there?			

VI. DEBTS AND ASSETS:

A. The marital residence:

Address of marital residence: _____
 _____ County: _____

Who is living in the home at this time? _____

Who will live in home after the divorce? _____

Who is making the mortgage or rent payment at this time? _____

The marital residence is [] leased [] owned Amount of monthly payment:\$ _____

Name(s) on lease or note: _____

Name(s) on deed: _____

How was it acquired? (inheritance, gift, purchase, etc.) _____

If owned, was the home acquired [] DURING the marriage or [] BEFORE the marriage

Approximate date property was purchased or acquired: _____

What significant improvements have been made to the home during the marriage, and what is the value of the improvements? _____

Approximate value of home: _____

Total amount owed on home (all leins): _____

1st leinholder: _____

Amount owed on loan: _____ Monthly payment: _____

Name(s) on note: _____

2nd leinholder: _____

Amount owed on loan: _____ Monthly payment: _____

Name(s) on note: _____

B. Other real property owned (land, rent houses, etc.)

1. Address: _____

_____ County: _____

How was it acquired? (inheritance, gift, purchase, etc.) _____

When acquired (approximate date)? _____

What is the property being used for? _____

Amount of monthly income received from this property: _____

Approximate value: _____ Amount owed: _____

Monthly payment: _____ Leinholder: _____

Improvements on property after date of marriage: _____

Other owners besides spouse, and percentages of ownership: _____

2. Address: _____

_____ County: _____

How was it acquired? (inheritance, gift, purchase, etc.) _____

When acquired (approximate date)? _____

What is the property being used for? _____

Amount of monthly income received from this property: _____

Approximate value: _____ Amount owed: _____

Monthly payment: _____ Leinholder: _____

Improvements on property after date of marriage: _____

Other owners besides spouse, and percentages of ownership: _____

3. Address: _____

_____ County: _____

How was it acquired? (inheritance, gift, purchase, etc.) _____

When acquired (approximate date)? _____

What is the property being used for? _____

Amount of monthly income received from this property: _____

Approximate value: _____ Amount owed: _____

Monthly payment: _____ Leinholder: _____

Improvements on property after date of marriage: _____

Other owners besides spouse, and percentages of ownership: _____

C. Mineral Rights

a. Property Address : _____

_____ County: _____

Amount per month: _____ Term of lease: _____

When and how acquired: _____

b. Property Address : _____

_____ County: _____

Amount per month: _____ Term of lease: _____

When and how acquired: _____

D. Businesses owned by either party:

1. Registered Name of company: _____

Type of business: _____

When acquired or formed: _____

By whom? _____

Capacity that each spouse is involved: _____

Other owners, partners, and percentage of ownership of each: _____

Approximate annual income earned from this business: _____

Approximate value of company: _____

Nature and value of hard assets owned by company (i.e., equipment, furniture, etc.)

2. Registered Name of company: _____

Type of business: _____

When acquired or formed: _____

By whom? _____

Capacity that each spouse is involved: _____

Other owners, partners, and percentage of ownership of each: _____

Approximate annual income earned from this business: _____

Approximate value of company: _____

Nature and value of hard assets owned by company (i.e., equipment, furniture, etc.)

E. Vehicles (owned or leased):

1. **Vehicle driven primarily by you** (year, model, make): _____

VIN: _____

Owned or leased? _____ Monthly payment: _____

Name(s) on the lease or note: _____

Leinholder: _____

Amt owed on vehicle: _____ Approximate value: _____

Is this vehicle used for work related purposes? _____

Should you be awarded this vehicle after divorce? _____

2. **Vehicle driven primarily by *your spouse*** (year, make, model): _____

VIN: _____

Owned or leased? _____ Monthly payment: _____

Name(s) on the lease or note: _____

Leinholder: _____

Amt owed on vehicle: _____ Approximate value: _____

Is this vehicle used for work related purposes? _____

Should you be awarded this vehicle after divorce? _____

3. Other vehicles owned (boats, planes, 4-wheelers, etc.)

a. Type: _____

VIN: _____

Owned or leased? _____ Monthly payment: _____

Name(s) on the lease or note: _____

Leinholder: _____

Amt owed on vehicle: _____ Approximate value: _____

Is this vehicle used for work related purposes? _____

Who should be awarded this vehicle after divorce? _____

- b. Type: _____
 VIN: _____
 Owned or leased? _____ Monthly payment: _____
 Name(s) on the lease or note: _____
 Leinholder: _____
 Amt owed on vehicle: _____ Approximate value: _____
 Is this vehicle used for work related purposes? _____
 Who should be awarded this vehicle after divorce? _____

F. Separate property not otherwise listed above:

1. Wife's –

- a. All other property of significant value (artwork, equipment, appliances, etc.) that was *acquired by wife prior to marriage*; include values and location of property:

- b. List all property of significant value that wife received *as a result of a gift or inheritance*; include date acquired and location of property: _____

- c. List funds wife has received *as a result of a personal injury settlement*: _____

 When and where were funds deposited? _____

2. Husband's –

- a. All other property of significant value (artwork, equipment, appliances, etc.) *acquired by husband prior to marriage*; include values and location of property:

- b. List all property of significant value that husband received *as a result of a gift or inheritance*; include date acquired and location of property: _____

- c. List funds husband has received *as a result of a personal injury settlement*.

 When and where were funds deposited? _____

G. Savings accounts, checking accounts acquired during the marriage

Banking Institution	Amount	In whose name (H,W, or both)
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		

H. Life insurance policies, amounts, beneficiaries:

On Husband:

Insurance company	Whole or Term	Value	Beneficiary
1. _____			
2. _____			

On Wife:

Insurance company	Whole or Term	Value	Beneficiary
1. _____			
2. _____			

I. Retirement Benefits

Wife

Name/type of account	Value	Acquired or increased during marriage?
1. _____		
2. _____		
3. _____		

Husband

Name/type of account	Value	Acquired or increased during marriage?
1. _____		
2. _____		
3. _____		

J. Other investments: (type, amount, in whose name, etc.)

1. _____
2. _____
3. _____
4. _____

K. Airline miles, gym memberships, club memberships, etc:

1. In Wife's Name:

a. _____

b. _____

2. In Husband's Name:

a. _____

b. _____

L. Separate Debts

1. Yours: List all existing debt incurred by you before the marriage, and all student loans

Incurred by you at any time (including creditor names and amounts):

a. _____

b. _____

c. _____

d. _____

2. Your Spouse's: List all debt incurred by your spouse before the marriage, and all student loans incurred by your spouse at any time (include creditor names and amounts):

a. _____

b. _____

c. _____

d. _____

M. Community Debts:

Other than student loans, list all existing debt that was incurred *during the marriage*, regardless of whose name it is in:

<u>Creditor</u>	<u>Amount of debt</u>	<u>In whose name</u>	<u>Purpose of debt</u>
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1. _____

2. _____

3. _____

4. _____

Ideally, how would you like to see the community debt distributed? _____

Ideally, how would you like to see community property distributed? _____

VIII. CHILDREN OF THE MARRIAGE (born or adopted) If no children born or adopted during this marriage, skip to section IX)

How many children were born or adopted to the marriage? _____ How many under 18? _____

Names of all children born or adopted, including adult children, from oldest to youngest:

- 1. _____ current age: _____
- 2. _____ current age: _____
- 3. _____ current age: _____
- 4. _____ current age: _____
- 5. _____ current age: _____
- 6. _____ current age: _____

THE FOLLOWING SECTION IS ONLY FOR CHILDREN BORN OR ADOPTED DURING THE MARRIAGE WHO ARE CURRENTLY UNDER THE AGE OF 18 YEARS:

Name:	Sex	D.O.B.	SS #	Place of birth

These children are currently in the care of: husband wife other: _____

If other, why? _____

Who is paying child support for these children? husband wife neither

Amount of child support: \$ _____ per _____

What type of permanent custody/visitation arrangement are you seeking? _____

Do any of these children have special needs that would require care beyond the age of 18 years?

Yes No If yes, explain: _____

Health Insurance:

Are the minor children subject to this suit currently covered by health insurance? Yes No

If yes: Name of insurance company: _____

Policy #: _____ Amount of monthly premium: _____

Insurance is through: Mother's employer father's employer

other: _____

Secondary coverage: _____

Other children NOT of this marriage:

1. Do you have minor children that are NOT of this marriage? NO YES how many? _____

Who do they live with? _____ Who has legal custody? _____

You are: paying child support receiving child support neither

Amount: \$ _____ per _____

2. Does your spouse have minor children that are NOT of this marriage: NO YES

If yes, how many? _____ Who do they live with? _____

Who has legal custody? _____

Your spouse is: paying child support receiving child support neither

Amount: \$ _____ per _____

IX. NAME CHANGE

Is wife requesting a name change? yes no don't know or undecided

If yes, to what name (First, Middle, Last)? _____

XI. INFORMATION FOR SERVICE (*Please provide us with a photograph of spouse if possible.)

For service of process, give general physical description of your spouse:

Height: _____ Weight: _____ Hair color: _____ Eye color: _____

Distinctive features (tattoos, birth marks): _____

Best time/place to serve him/her: _____

If not successful, is there a second location? _____

Describe vehicle he/she will be driving (include color)? _____

XI. Please sign below if this information is true and complete to the best of your knowledge:

Signature: _____ *Date:* _____

Printed Name: _____
