

MARITAL DATA:

Date of Marriage:	Place of Marriage (State/County):
Date of Separation:	Wife's Maiden Name:
Present County of Residence (years/months):	Present County of Residence (years/months):

Husband:

Wife:

State of Birth:	Race:	State of Birth:	Race:
Number of Marriages (including the present marriage):		Number of Marriages (including the present marriage):	

All Children:

CHILD'S NAME:	DATE OF BIRTH:

SPOUSE/PARTNER DATA:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Birth Date: _____ Social Security #: _____

Telephone: (Home) _____ (Work) _____ (Cell) _____

Place of Employment: _____

Employer's Address: _____

Position/Job Title: _____

PROPERTY/MARITAL HOME:

Who is living in the marital home? _____ Who pays mortgage? _____

Monthly mortgage payment? _____ Estimated equity in home? _____

Is there any other significant marital property? _____

FINANCIAL DATA:

CLIENT:

SPOUSE/PARTNER:

Wage Income:	Health/Dental Paid:	Wage Income:	Health/Dental Paid:
Child Support Received:	Child Support Paid:	Child Support Received:	Child Support Paid:
Alimony Received:	Alimony Paid:	Alimony Received:	Alimony Paid:
Other Income:	Daycare Paid:	Other Income:	Daycare Paid:
Retirement Accounts:		Retirement Accounts:	

Joint Accounts:

Checking	Savings	Credit Card	Loan	Other: _____	Amount: _____
Checking	Savings	Credit Card	Loan	Other: _____	Amount: _____
Checking	Savings	Credit Card	Loan	Other: _____	Amount: _____
Checking	Savings	Credit Card	Loan	Other: _____	Amount: _____

OPPOSING COUNSEL:

Name: _____
Address: _____
Telephone: _____ Fax: _____

GUARDIAN AD LITEM:

Name: _____
Address: _____
Telephone: _____ Fax: _____

GENERAL NOTES:

