

CLIENT DATA SHEET DIVORCE

Date _____

A. CLIENT (All notices will be sent here.)

Name	Birthplace	Date of Birth
Mailing Address	Date Moved to This Address	Inside City Limits?
City, State, Zip	Phone (Home) (Work)	Residence County
Employer & Address	Position/Title	Social Security No.
Other Address Where We Can Reach You Name Address		Phone
Last Year Completed in School - Grade _____ College 1 2 3 4 Other		
Number of Marriages (including this one):		
If Previously Married, How Many Ended by:		
Death?	Divorce?	Dissolution? Annulment?

B. SPOUSE

Name	Birthplace	Date of Birth
Mailing Address	Date Moved to This Address	Inside City Limits?
City, State, Zip	Phone (Home) (Work)	Residence County
Employer & Address	Position/Title	Social Security No.
Is spouse in military? [] Yes [] No If yes, where?		
Other Address Where We Can Reach Spouse Name Address		Phone
Last Year Completed in School - Grade _____ College 1 2 3 4 Other		
Number of Marriages (including this one):		
If Previously Married, How Many Ended by:		
Death?	Divorce?	Dissolution? Annulment?
Has Spouse hired an attorney? [] Yes [] No If yes, give attorney's name & address:		

C. MARRIAGE

Date of Marriage	Years of Marriage	Marriage City, County and State
How long have you lived in this state?		How long have you lived in residence county?
How long has spouse lived in this state		How long has spouse lived in residence county?
Type of Wedding: [] common law [] civil [] religious	Wife's Former Name	Date of Separation

D. NAMES OF LIVING CHILDREN OF THIS MARRIAGE (Use reverse side if needed)

Name	Date of Birth	Residing With
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
Is Wife presently pregnant? [] Yes [] No		

E. WHERE AND WITH WHOM HAS EACH CHILD LIVED FOR THE PAST FIVE YEARS?

Name	Date of Birth	Residing With
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

How did you hear of our services? _____