



Family Law Questionnaire

CLIENT INFORMATION

Name:		
Date of birth:	SSN:	Phone:
Current address:		
Marital Status:	Previous Spouse(s):	
Driver's License:		
Pregnant: Yes NO (Circle)	Place of Birth:	
E-mail:		

CLIENT EMPLOYMENT INFORMATION

Current employer:		
Employer address:		How long?
Position:	Hourly Salary (circle one)	Annual income:

ADVERSE PARTY'S INFORMATION

Name:		
Date of birth:	SSN:	Phone:
Current address:		
Relationship:	E-mail:	Place of Birth:
Attorney:	Marital Status:	
Job Title/Employer:	Annual Income:	
Driver's License:	Previous Spouse(s):	
Pregnant: Yes NO (Circle one)		

RELATIONSHIP WITH ADVERSE PARTY

Date of Marriage/Domestic Partnership/Other Relationship:
Place of Marriage/Domestic Partnership:
Date of Separation:
Brief Description of Current Living Situation:
Separation Contract or Prenuptial Agreement? Yes No (Please Circle)
Other Information:



CHILDREN			
Full Name and SSN	Age	Date of Birth	Lives with:

Brief description of preferred custody arrangement (if applicable):

REAL PROPERTY				
Address	Name(s) on Title	FMV	Lender(s)	Equity

ASSETS				
Retirement Plan/Benefits	Owner	Percent Vested	Value	
Investment Accounts & Securities	Owner	Present Value	Number of Shares	Dividend Amount
Cash	Financial Institution	Account Type	Current Balance	
Interests in Business	Name/Type of Business	Description	Ownership %	Net Worth
Life Insurance	Company	Policy Owner/Beneficiary	Life or Term?	Death Benefit



Valuable Personal Property	Description	Fair Market Value	Liens	
Vehicles	Name on Title	Year/Make/Model	Market Value	Balance Owed
Stock Options & Stock Awards				
Interests in Trusts	Beneficiary	Description	Value	
DEBTS AND LIABILITIES (INCLUDING MORTGAGES, CREDIT CARDS, LOANS ETC)				
Description		Amount		
PREVIOUS LEGAL ACTIONS				
Description:				
Date last order/pleading entered:			Case Number:	
Attorney:				



Anything else we should know?

Client Signature

Date