

**CLIENT DIVORCE INFORMATION**

Who is filing? \_\_\_\_\_

Wife's full name:

Husband's full name:

\_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone # \_\_\_\_\_

Phone # \_\_\_\_\_

Date of Birth \_\_\_\_\_

Date of Birth \_\_\_\_\_

Social Security # \_\_\_\_\_

Social Security # \_\_\_\_\_

Annual Income \_\_\_\_\_

Annual Income \_\_\_\_\_

Employed by \_\_\_\_\_

Employed by \_\_\_\_\_

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

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

\_\_\_\_\_

\_\_\_\_\_

Employer's Phone \_\_\_\_\_

Employer's Phone \_\_\_\_\_

Number of marriages \_\_\_\_\_

Number of marriages \_\_\_\_\_

Married on \_\_\_\_\_

Separated on \_\_\_\_\_

Place where married (City, State) \_\_\_\_\_

Wife's maiden name \_\_\_\_\_ Does she want it back? \_\_\_\_\_

Children's full names and dates of birth: \_\_\_\_\_

\_\_\_\_\_

Who keeps custody of children, plan for visitation? Any other agreement as to children.

\_\_\_\_\_

Who keeps insurance on children? \_\_\_\_\_

Cost of individual insurance, and cost of family insurance? How many people covered by family insurance? \_\_\_\_\_

Marital property and how divided (use back if necessary): \_\_\_\_\_

\_\_\_\_\_

Please list any joint debts and who will pay them: \_\_\_\_\_

\_\_\_\_\_

Please list any other agreements that you have: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_