

## **DIVORCE CLIENT INFORMATION SHEET**

Date:		
Name:	Date of	Birth:
Address:	_ City, State, Zip	):
County: Phone I	Number:	
Date moved to this address:		
How long have you lived at this address:		
Mailing address if different from above:		
Email:		
Employer:	Employer Phone	#:
Employer Address:		
Gross income per year:		
Spouse's Name:		Birth:
Address:	_ City, State, Zip	D:
County: Phone	Number:	
Date moved to this address:		
How long have they lived at this address:_		
Mailing address if different from above:		
Email:		
Employer:	Employer Phone	#:
Employer Address:		
Gross income per year:		
Physical Description:	Height:	Weight:
Hair Color: Glasses?	Tattoos:	
Best time/location to serve the other party:	<b>:</b>	

Date of Marriage:		
Names of the Parties Before the M	Iarriage:	<del></del>
Date of Separation:		
Where were you married? City, C	County, State:	<del></del>
Name of Children of this Marriage	Date of Birth	
1.		
2. 3. 4.		
5.		
6.		
Is a party currently pregnant?	If yes, is it a ch	nild of the marriage?
Were any of the children adopted	during the marriage?_	
Any other children living with you	u that are from a prior 1	relationship?
What pronouns do you prefer we	use? Yo	our spouse?
Your children?		
How did you hear about Schlesing	ger & Strauss, LLC?	