

POTENTIAL CLIENT INTAKE – DIVORCE

NAME: _____

ADDRESS: _____

PHONE: HOME: _____ OFFICE _____

CELL Phone: _____ E-mail: _____

HOW DID YOU HEAR OF US: _____

SPOUSE'S NAME: _____

SPOUSE'S ADDRESS: _____

SPOUSE'S ATTORNEY: _____

CHILDREN'S NAMES/ADDRESSES/DATE OF BIRTH

DATE OF MARRIAGE: _____

DATE OF SEPARATION: _____

ARE YOU OR YOUR CHILDREN IN DANGER OF PHYSICAL ABUSE? _____

HAS YOUR SPOUSE EVER STRUCK YOU OR YOUR CHILDREN? _____

IF YES, PLEASE CALL OUR OFFICE IMMEDIATELY 978-657-5600

CLIENT'S EMPLOYER NAME/ADDRESS _____

POSITION: _____

WEEKLY WAGES: _____

SPOUSE'S EMPLOYER
NAME/ADDRESS _____

POSITION: _____

WEEKLY WAGES: _____

DO YOU OR YOUR SPOUSE OWN REAL ESTATE? IF YES, FAIR MARKET
VALUE/MORTGAGE _____

DO YOU OR YOUR SPOUSE HAVE ANY RETIREMENT BENEFITS/ACCOUNTS?

DO YOU OR YOUR SPOUSE HAVE ANY INVESTMENTS?

DO YOU OR YOUR SPOUSE HAVE ANY OTHER ASSETS WORTH OVER \$1000.00?

Will there be a dispute over custody of the children or visitation?

Is the division of assets an issue?

Is your Spouse aware that you want a divorce and are contacting an attorney?

Have you discussed any specific terms of a divorce with your spouse?

If yes, what are they? _____