

MATRIMONIAL CLIENT INFORMATION FORM

Date: _____ Referred By: _____

Legal Name: _____

Address: _____

Mailing Address (if different): _____

Telephone No.: (Work) _____ (Home) _____

(Cell) _____ Email _____

Name and Address of Employer: _____

How long employed? _____ Gross Pay \$ _____ Net Pay \$ _____

Title or Occupation: _____

Educational Background: _____

Work Experience: _____

Date of Birth: _____ Age: _____ SS#: _____

Description: Height: _____ Weight: _____ Eye color: _____ Hair: _____

INFORMATION ON SPOUSE

Legal Name: _____

Address: _____

Mailing Address (if different): _____

Telephone No.: (Work) _____ (Home) _____

(Cell) _____ Email _____

Name and Address of Employer: _____

How long employed? _____ Gross Pay \$ _____ Net Pay \$ _____

Title or Occupation: _____

Educational Background: _____

Work Experience: _____

Date of Birth: _____ Age: _____ SS#: _____

Description: Height: _____ Weight: _____ Eye color: _____ Hair: _____

INFORMATION ON PRESENT MARRIAGE

Date of Marriage: _____ Place: _____

Ceremony: Civil _____ Religious _____ Certificate Available: _____

Maiden Name: _____ Prior Divorces: _____

Prior Proceedings (Support, Domestic Violence, etc.): _____

CHILDREN OF PRESENT MARRIAGE

Name: _____ Date of Birth: _____ Age: _____

Name: _____ Date of Birth: _____ Age: _____

Name: _____ Date of Birth: _____ Age: _____

CHILDREN OF YOUR OR YOUR SPOUSE'S FROM A PRIOR MARRIAGE

Name: _____ Date of Birth: _____ Age: _____

Name: _____ Date of Birth: _____ Age: _____

GROUNDS FOR DIVORCE

Separation Date: _____

Adultery: _____ Habitual Drunkenness: _____

Mental Cruelty (describe): _____

Personal Injury or other claims against spouse (rape, intentional infliction of emotional distress, assault, etc.): _____

STATEMENT OF ASSETS

1- Real Property:

_____ \$ _____

_____ \$ _____

_____ \$ _____

2- Bank Accounts, Certificates of Deposit:

_____ \$ _____

_____ \$ _____

_____ \$ _____

3- Vehicles:

_____ \$ _____

_____ \$ _____

_____ \$ _____

4- Stocks and Bonds:

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

5- Other Short Term Debts:

_____ \$ _____

_____ \$ _____

_____ \$ _____

6- Contingent Liabilities:

_____ \$ _____

_____ \$ _____

Attorney Notes