

**LAW OFFICES  
LES D. WIGHT  
CLIENT INFORMATION SHEET  
DISSOLUTION OR SEPARATION WITH CHILDREN.**

**YOUR NAME:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

HomePhone: \_\_\_\_\_ WorkPhone: \_\_\_\_\_ Cell \_\_\_\_\_

Email (if used): \_\_\_\_\_ Text on Cell? Y N carrier: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ State of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ SSN: \_\_\_\_\_

Education completed: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Rate of pay: \_\_\_\_\_ per \_\_\_\_\_ Pension? \_\_\_\_\_

# this marriage for you \_\_\_\_\_ Previous marriage ended when \_\_\_\_\_ by death? divorce?

This Marriage date: / / Date separated: / /

City; county and state where married: \_\_\_\_\_

County marriage license issued: \_\_\_\_\_ Wife's maiden name: \_\_\_\_\_

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**Children born of this marriage:**

**Name birth date age M or F Soc. Sec. Nos.**

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1.

2.

3.

4.

Medical Insurance on Kids? \_\_\_\_\_ By: \_\_\_\_\_ Monthly Cost: \_\_\_\_\_

Day Care Costs \$ \_\_\_\_\_ per week school year \$ \_\_\_\_\_ summer

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Spouse's Name: \_\_\_\_\_

Spouse Address: \_\_\_\_\_

Spouse's Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Date of Birth: / / State of Birth: \_\_\_\_\_ Race: \_\_\_\_\_

S.S.N. - - Grade Completed: \_\_\_\_\_

# this marriage \_\_\_\_\_ prev. marriage ended when \_\_\_\_\_ ended by death? divorce?

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Rate of pay: \_\_\_\_\_ per \_\_\_\_\_ Pension? \_\_\_\_\_

Entry of App. \_\_\_ Special Process \_\_\_ Serve at: \_\_\_\_\_

In the dissolution or legal separation you are seeking and what relief are you asking the court to order?

- \_\_\_\_\_ Joint Child custody—with parent plan designating one parent for school info
- \_\_\_\_\_ Child support
- \_\_\_\_\_ Sole custody (must have provable reasons why)
- \_\_\_\_\_ Divide marital property
- \_\_\_\_\_ Set aside non-marital property
- \_\_\_\_\_ Maintenance or alimony
- \_\_\_\_\_ Restoration of previous name of: \_\_\_\_\_
- \_\_\_\_\_ Payment of certain debts (List)
- \_\_\_\_\_ Possession of the family home
- \_\_\_\_\_ Permission to remove children from the State
- \_\_\_\_\_ Attorney fees
- \_\_\_\_\_ Restricted visitation (must have provable reasons why)
- \_\_\_\_\_ Other:

Does any family member have any special health problems or special needs?

Describe:

Is there any reason either spouse cannot work?

Has visitation been going smoothly so far?

