

Divorce Intake Form | 2021

DATE:

PLEASE PROVIDE THE FOLLOWING INFORMATION ABOUT YOURSELF:

Full Name:			
Maiden Name:	(if applicable)		
Address:			
Telephone:	Home:	Work:	Cell:
E-mail:			
Driver's License #:			
Birth Date & SSN:			
Place of Birth:			
Level of Education:			
Employer:		Type of Work:	
Employer's Address:			
Income (per month)	Gross:	Net:	Other:

PLEASE PROVIDE THE FOLLOWING INFORMATION ABOUT YOUR SPOUSE:

Full Name:			
Maiden Name:	(if applicable)		
Address:			
Telephone:	Home:	Work:	Cell:
E-mail:			
Driver's License #:			
Birth Date & SSN:			
Place of Birth:			
Level of Education:			

Divorce Intake Form | 2021

Employer:		Type of Work:	
Employer's Address:			
Income (per month)	Gross:	Net:	Other:

PLEASE ANSWER THE FOLLOWING QUESTIONS:

Have you filed for divorce before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	When:
What county have you lived in for the last 3 months?			
Date of Marriage:			
Place of Marriage:			
Date couple last resided together:			
Which marriage is this for you?	<input type="checkbox"/> First	<input type="checkbox"/> Second	<input type="checkbox"/> Third <input type="checkbox"/> Fourth
If not 1st Marriage, when did last end?			
How did last marriage end?	<input type="checkbox"/> Death	<input type="checkbox"/> Divorce	<input type="checkbox"/> Annulment <input type="checkbox"/> Dissolution
Which marriage is this for your spouse?	<input type="checkbox"/> First	<input type="checkbox"/> Second	<input type="checkbox"/> Third <input type="checkbox"/> Fourth
If not 1st marriage, when did last end?			
How did spouse's last marriage end?	<input type="checkbox"/> Death	<input type="checkbox"/> Divorce	<input type="checkbox"/> Annulment <input type="checkbox"/> Dissolution
Referred to Blakelock Law by:			
Did you want maiden name restored for you, your spouse, or your children?	<input type="checkbox"/> Yes, me	<input type="checkbox"/> Yes, my spouse	<input type="checkbox"/> Yes, my children <input type="checkbox"/> No <input type="checkbox"/> Not sure
GROUNDS –What is the major problem with the marriage?			

PLEASE LIST ALL NATURAL/ADOPTED CHILDREN OF YOU AND YOUR SPOUSE:

AGE	BIRTHDAY	FULL NAME OF CHILD	SSN
Is a child expected? <input type="checkbox"/> No <input type="checkbox"/> Yes Due Date:			

WHAT REAL ESTATE / LAND DO YOU AND YOUR SPOUSE OWN?

LOCATION	VALUE	MORTGAGE BALANCE

WHAT PERSONAL PROPERTY DO YOU AND YOUR SPOUSE OWN?

VEHICLES:	Your Car	\$
(include \$ owed on your car)	Your Spouse's Car	\$
	Other Cars	
	Other Transport Vehicles	
BANK ACCOUNTS:	Joint Accounts	\$
	Your Accounts	\$
	Your Spouse's Accounts	\$
	Business Accounts	\$
CERTIFICATES OF DEPOSIT:		
STOCKS:		
BUSINESS INTERESTS:		

OTHER ASSETS:	

WHAT DEBTS DO YOU AND YOUR SPOUSE OWE?

Creditor's Name	Purpose for Debt	Balance Owed	Who should pay this debt?
		\$	
		\$	
		\$	
		\$	
		\$	

HEALTH INSURANCE

	Under whose name?
	Under whose name?

LIFE INSURANCE

Name / Type of Policy	Cash Value

WHAT RETIREMENT OR PENSION DO YOU AND YOUR SPOUSE HAVE?

	Type	Cash Value
Yours		\$
Your Spouse's		\$
IRA		\$
Others		\$

years ago