

PRATT & VARSALONA

ATTORNEYS AT LAW

711 South Charles G. Seivers Blvd.

Clinton, TN 37716-2725

DIVORCE CLIENT INTAKE FORM

Date: _____

1. STATISTICAL INFORMATION:

CLIENT:

Client Name: _____

Wife's Maiden Name: _____

Address: _____

County: _____

Date of Birth: _____

Place of Birth: _____

Social Security Number: _____

Race: _____

Employment: _____

Address of Employment: _____

Occupation: _____

Number of Previous Marriages: _____

How were marriages terminated: _____

Military Record: _____

Education: _____ (Highest level completed)

SPOUSE:

Spouse's Name: _____

Spouse's Maiden Name: _____

Address: _____

County: _____

Date of Birth: _____

Place of Birth: _____

Social Security Number: _____

Race: _____

Employment: _____

Address of Employment: _____

Occupation: _____

Number of Previous Marriages: _____

How were the marriages terminated:

Military Record: _____

Education: _____ (Highest level completed)

MARRIAGE INFORMATION:

Date of Marriage: _____

City and State Where Married: _____

Date of Separation _____

CHILDREN:

D.O.B.

SS#

_____	_____	_____
_____	_____	_____
_____	_____	_____

ADDRESSES: (LIVED WITH CHILDREN FOR THE LAST 5 YEARS)

2. OPPOSING ATTORNEY:

Name: _____

Docket Number: _____

3. DEBTS OF THE MARRIAGE:

Name of Creditor	Amount	Acct Number	Who will pay debt?
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Attach additional sheet if necessary.

4. REAL ESTATE:

1. Real Estate located at _____
Who owns the property? _____
Debt Amount: _____
Lender's name and address: _____
Account Number: _____
Who will assume and pay debt: _____

2. Real Estate located at _____
Who owns the property? _____
Debt Amount: _____
Lender's name and address: _____
Account Number: _____
Who will assume and pay debt: _____

5. PERSONALTY:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. FINANCIAL ACCOUNTS:

Client:

Spouse:

7. ATTORNEY FEES/COURT COSTS:

How will attorney fees be paid? _____
Who will be responsible for paying Court costs? (Split, Client, or Spouse)

8. AUTOMOBILES:

Client's:	Make	Model	Year	Amount of Debt	Lender	Value
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Spouse's:	Make	Model	Year	Amount of Debt	Lender	Value
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9. OTHER VEHICLES:

Boats, ATVs, Jet Ski, Tractors, Riding Lawnmowers
Name Debt Who will assume debt and item?

10. RETIREMENT: 401K, IRAs, Stocks and Bonds:

1. Type of account: _____
Name of account: _____
Owner of account: _____
2. Type of account: _____
Name of account: _____
Owner of account: _____

11. RESTORATION OF FORMER NAME: _____

12. INSURANCE PROVISIONS:

How are the parties covered by insurance?
Husband: _____
Company: _____

Policy No.: _____

Wife: _____

Company: _____

Policy No.: _____

13. INCOME SHARES WORKSHEET:

NUMBER OF DAYS IN CUSTODY OF EACH PARENT:

Child's Name _____ Mother _____ days

Father _____ days

days

Child's Name _____ Mother _____ days

Father _____ days

days

Child's Name _____ Mother _____ days

Father _____ days

INCOME: (Gross Monthly)

Mother: _____

Father: _____

HEALTH INSURANCE PREMIUM:

\$ _____ PAID BY _____

\$ _____ PAID BY _____

CHILDCARE COSTS:

\$ _____ PAID BY _____

\$ _____ PAID BY _____

RECURRING MEDICAL EXPENSES:

\$ _____

OTHER EXPENSES ROUTINELY PAID:

Such as music, private school, athletics etc. describe _____

SUPPORT OF OTHER CHILDREN

(a) prior court order including docket number _____

(b) in home more (more than 50%), 75% of theoretical order

(c) out of home lesser of 75% or actual documented expense

REASONS TO DEVIATE

(a) low income _____
other basis (state facts which would allow Court to find deviation in best
interest)_____