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DIVORCE W/CHILDREN INTAKE FORM
(PLEASE COMPLETE IN FULL)

Today's Date: _____

CLIENT'S PERSONAL INFORMATION

NAME: _____
(First) (Middle) (Last)

ADDRESS: _____
(Number) (Street) (Apt.)

(City) (County) (State) (Zip Code)

SOCIAL SEC. NO.: _____

TEL.: H _____ W _____ C _____

E-MAIL, PAGER, OTHER: _____

DOB _____ AGE _____ RACE* _____

*Required for State's Vital Statistics Form VS-300 and statistical purposes

BIRTHPLACE: _____
(Country) (State)

EDUCATION: _____
(High School) (Yr Graduated) (College) (Yr Graduated)

OCCUPATION: _____ INCOME _____

EMPLOYER - Name _____

Address _____

Tel. _____ Supervisor's Name _____

Type Of Business _____

CONTINUOUS RESIDENT OF KY SINCE: (day/mo/yr) _____

PREVIOUS ADDRESS: _____
(City) (County) (State)

Lived There From _____ To _____

NO. OF TIMES MARRIED (INCLUDING CURRENT MARRIAGE) _____

DO YOU HAVE AN ATTORNEY? Yes__No__ Name and Contact information _____

SPOUSE'S PERSONAL INFORMATION

NAME: _____
(First) (Middle) (Last)

ADDRESS: _____
(Number) (Street) (Apt.)

(City) (County) (State) (Zip Code)

SOCIAL SEC. NO.: _____

TEL.: H _____ W _____ C _____

E-MAIL, PAGER, OTHER: _____

DOB _____ AGE _____ RACE* _____

*Required for State's Vital Statistics Form VS-300 and statistical purposes

BIRTHPLACE: _____
(Country) (State)

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(High School) (Yr Graduated) (College) (Yr Graduated)

OCCUPATION: _____ INCOME _____

EMPLOYER - Name _____

Address _____

Tel. _____ Supervisor's Name _____

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CONTINUOUS RESIDENT OF KY SINCE: (day/mo/yr) _____

PREVIOUS ADDRESS: _____
(City) (County) (State)

Lived There From _____ To _____

NO. OF TIMES MARRIED (INCLUDING CURRENT MARRIAGE) _____

DOES YOUR SPOUSE HAVE AN ATTORNEY? Yes ___ No ___ Name and Contact information

NAME CHANGE

WIFE'S FULL MAIDEN NAME: _____

WIFE'S FULL NAME PRIOR TO THIS MARIAGE: _____

DOES WIFE WANT HER NAME CHANGED? Yes ___ No ___ Don't know ___

IF YES, TO WHAT? (IF WIFE WANTS NAME CHANGED TO SOMETHING OTHER THAN MAIDEN NAME PLEASE EXPLAIN) _____

YOUR MARRIAGE

DATE OF MARRIAGE: _____
(Month) (Day) (Year)

DATE OF SEPARATION: _____
(Month) (Day) (Year)

WHERE IS MARRIAGE REGISTERED? _____
(City) (County) (State)

CIRCUMSTANCES OF SEPARATION _____

DATE OF LAST MARITAL RELATIONS (Sexual Intercourse) _____

Please describe why you feel your marriage is irretrievably broken.

CHILDREN OF THE MARRIAGE

Is there any possibility the Wife is currently pregnant? Yes__ No__

For each of the parties' children 18 or under or still in high school, please provide the following information:

Child 1: Name: _____

DOB _____ Age _____ Sex _____

Child's Social Security No.: _____

Child's school _____ Grade: _____

IMPORTANT: State when, where and with what adults the child has lived with for the past 5 years.

From _____ To _____
(month) (day) (year) (month) (day) (year)

Child 1 lived at:

Street Address City State Zip Code

From _____ To _____
(month) (day) (year) (month) (day) (year)

Child 2 lived at:

Street Address City State Zip Code

Child 2 lived with:

Name Relationship to child Current Address of Each Adult

- 1.
- 2.
- 3.

From _____ To _____
(month) (day) (year) (month) (day) (year)

Child 2 lived at:

Street Address City State Zip Code

Child 2 lived with:

Name Relationship to child Current Address of Each Adult

- 1.
- 2.
- 3.

Child 3: Name: _____

DOB _____ Age _____ Sex _____

Child's Social Security No.: _____

Child's school _____ Grade: _____

IMPORTANT: State when, where and with what adults the child has lived with for the past 5 years.

From _____ To _____
(month) (day) (year) (month) (day) (year)

Child 2 lived at:

Street Address City State Zip Code

Child 3 lived with these adults:

Name Relationship to child Current Address of Each Adult

- 1.
- 2.
- 3.

From _____ To _____
(month) (day) (year) (month) (day) (year)

Child 3 lived at:

Street Address _____ City _____ State _____ Zip Code _____

Child 3 lived with:

Name Relationship to child Current Address of Each Adult

- 1.
- 2.
- 3.

From _____ To _____
(month) (day) (year) (month) (day) (year)

Child 3 lived at:

Street Address _____ City _____ State _____ Zip Code _____

Child 3 lived with:

Name Relationship to child Current Address of Each Adult

- 1.
- 2.
- 3.

USE BACK OF PAGE IF THERE ARE MORE CHILDREN OR ADDRESSES

CHILD SUPPORT, CUSTODY & MAINTENANCE

Do you wish to seek maintenance/alimony from your spouse? Yes__ No__

How much? _____ For how long? _____

Do you have an agreement with your spouse on maintenance/alimony? Yes__ No__

Explain why you need maintenance/alimony

Have you and your spouse made any arrangements or agreements concerning custody, visitation, or child support for your children? Yes__ No__

What do YOU (check "No" above) want or what is the AGREEMENT (check "Yes" above) with regards to the following:

Custody _____

Visitation _____

Child Support _____

What does **YOUR SPOUSE** want with regards to the following:

Custody _____

Visitation _____

Child Support _____

Does anyone besides you and your spouse claim to have custody or visitation rights to your child(ren)? If so, please state his/her name, relation to child(ren), address, and telephone number.

PROPERTY OF THE PARTIES

Please identify **YOUR AND YOUR SPOUSE'S** bank accounts, cds, 401(k)s, IRAs, stocks, mutual funds, pensions, etc. And state the value of each.

<u>Name on Account</u>	<u>Bank/Fund Name</u>	<u>Account Type</u>	<u>Value</u>	<u>Agreement?</u>	<u>Who Will Keep It?</u>
1.				yes__no__	H__W__Uknown__
2.				yes__no__	H__W__Uknown__
3.				yes__no__	H__W__Uknown__
4.				yes__no__	H__W__Uknown__
5.				yes__no__	H__W__Uknown__

Please identify the major debts of the parties

<u>Name on Account</u>	<u>Creditor</u>	<u>Item</u>	<u>Amount Owed</u>	<u>Agreement?</u>	<u>Who Will Pay It?</u>
1.				yes__no__	H__W__Uknown__
2.				yes__no__	H__W__Uknown__
3.				yes__no__	H__W__Uknown__
4.				yes__no__	H__W__Uknown__
5.				yes__no__	H__W__Uknown__
6.				yes__no__	H__W__Uknown__
7.				yes__no__	H__W__Uknown__
8.				yes__no__	H__W__Uknown__
9.				yes__no__	H__W__Uknown__
10.				yes__no__	H__W__Uknown__

CASE ISSUES

Explain any of the following issues of the marriage:

Physical violence _____

Alcohol/drug abuse _____

Sexual addiction _____

Gambling _____

Finances _____

Disability or illness _____

Mental illness _____

Boyfriend/girlfriend _____

List all EPO/DVO or CPS (abuse, neglect) cases involving you, your spouse or any of the children of either party.

List all other lawsuits involving you, your spouse or any of the children of either party.

Please state all issues that your spouse may claim about you that can be used against you in deciding custody/visitation with your child(ren).

Please state all issues that you claim about your spouse that can be used against him/her in deciding custody/visitation with your child(ren).

What are your goals for the next few years. _____
