

**THOMAS LAW GROUP, P.C.**  
**DOMESTIC RELATIONS INTAKE SHEET**

***Confidential Client History***

Yourself: \_\_\_\_\_  
Full Name Maiden/Former Name

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Spouse: \_\_\_\_\_  
Full Name Maiden/Former Name

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Your Home Address: \_\_\_\_\_

Home Tel: \_\_\_\_\_ Work Tel: \_\_\_\_\_

Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

Home address for past two years: \_\_\_\_\_  
\_\_\_\_\_

***Minor Children of Marriage (Either born of or adopted):***

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

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**Alternate Contact:**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Spouse's Information**

Spouse's Current Address: \_\_\_\_\_

Cell/Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Spouse's Attorney Name and Telephone Number: \_\_\_\_\_

**Marital Information:**

Marital Status:     Married             Divorced             Separated

Date of Marriage: \_\_\_\_\_ Place of Marriage: \_\_\_\_\_

Are you and your spouse living together now? \_\_\_\_\_

If no, what was date of separation? \_\_\_\_\_

Where are you living, since date of separation? \_\_\_\_\_

Where is spouse living, since date of separation? \_\_\_\_\_

Have you an interest in reconciliation?             Yes             No

Have you and your spouse seen any marital counselors?             Yes             No

If yes, please list names of counselors.

Do you anticipate a dispute about custody of the children?             Yes             No

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**Prior Marriages:**

List prior marriages: \_\_\_\_\_  
\_\_\_\_\_

*List names of children of yourself or your spouse other than those listed above. State with whom the children live, and who has legal custody, or if they have been adopted.*

Yourself: \_\_\_\_\_  
\_\_\_\_\_

Your Spouse: \_\_\_\_\_  
\_\_\_\_\_

**Your Employment:**

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

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

Position: \_\_\_\_\_

**Your Spouse's Employment:**

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

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

Position: \_\_\_\_\_

**Preliminary Financial Information:**

Please list any bank accounts to which you and your spouse have access:

Joint: \_\_\_\_\_

Wife: \_\_\_\_\_

Husband: \_\_\_\_\_