Client Name: _____

Client Questionnaire - Divorce

Please fill out this questionnaire and return it as soon as possible. It is important that you answer each question fully. It is imperative that you be candid!

You should answer all questions relevant to your case. If a question does not apply to your particular situation, please indicate by marking the question "N/A." If the answer to any question requires more space than has been provided on the form, please complete your answer on a separate sheet. Refer to the question number to which your answer applies and attach your answer to this questionnaire.

Your responses to these questions will help to organize your case and will save you money on attorney's fees in trying to gather and assemble information after the case is in progress. Since your answers are being made to an attorney, you are assured of confidentiality and are protected by the attorney-client privilege.

NOTICE OF CONFIDENTIALITY

THE INFORMATION IN THIS DOCUMENT IS SUBJECT TO THE ATTORNEY-CLIENT PRIVILEGE, AS PROVIDED IN THE TEXAS RULES OF EVIDENCE. HOWEVER, IF A PROFESSIONAL, INCLUDING AN ATTORNEY OR AN EMPLOYEE OF AN ATTORNEY, HAS CAUSE TO BELIEVE THAT A CHILD HAS BEEN ABUSED OR NEGLECTED OR MAY BE ABUSED OR NEGLECTED OR THAT A CHILD IS A VICTIM OF AN OFFENSE UNDER SECTION 21.11 OF THE TEXAS PENAL CODE, AND THE PROFESSIONAL HAS CAUSE TO BELIEVE THAT THE CHILD HAS BEEN ABUSED AS DEFINED BY SECTION 261.001 OF THE TEXAS FAMILY CODE, OR IF THE PROFESSIONAL HAS CAUSE TO BELIEVE THAT AN ADULT WAS A VICTIM OF ABUSE OR NEGLECT AS A CHILD AND THE PROFESSIONAL DETERMINES IN GOOD FAITH THAT DISCLOSURE OF THE INFORMATION IS NECESSARY TO PROTECT THE HEALTH AND SAFETY OF ANOTHER CHILD OR AN ELDERLY PERSON OR DISABLED PERSON AS DEFINED BY SECTION 48.002 OF THE TEXAS HUMAN RESOURCES CODE, THE PROFESSIONAL SHALL MAKE A REPORT NOT LATER THAN THE FORTY-EIGHTH HOUR AFTER THE HOUR THE PROFESSIONAL FIRST SUSPECTS THAT THE CHILD HAS BEEN OR MAY BE ABUSED OR NEGLECTED OR IS A VICTIM OF AN OFFENSE UNDER SECTION 21.11 OF THE TEXAS PENAL CODE OR THAT THE ADULT WAS A VICTIM OF ABUSE OR NEGLECT AS A CHILD AND THAT

THE DISCLOSURE IS NECESSARY. THE REPORT SHALL BE MADE TO THE APPROPRIATE AGENCY.

THE CONTENTS OF THIS DOCUMENT CONSTITUTE ATTORNEY WORK PRODUCT, ARE CONFIDENTIAL AND ARE NOT TO BE DISCLOSED TO THIRD PERSONS OTHER THAN THOSE TO WHOM DISCLOSURE IS MADE IN FURTHERANCE OF THE RENDITION OF PROFESSIONAL LEGAL SERVICES.

Privacy Policy Regarding Social Security Numbers: Social Security numbers will be divulged only when necessary during the course and within the scope of our employment. The firm collects them from various sources, including income tax returns as well as the client. They are used to identify parties for a number of purposes, including determination of wages, preparation of orders to withhold wages for child support and reports filed with the state of Texas, and obtaining information about retirement benefits. Only employees of the firm who have a need to know will have access to this personal information. Every step is taken to protect the client's privacy. This information is kept secure within the office of the firm in file folders and file drawers, until the file information is retired and the file is removed to a locked, off-site storage facility. Client information will eventually be shredded.

Information Requested

About you:

1. Please give the following information.

Full name:
Date of birth: Place of birth:
Social Security number:
Driver's license number and state:
Maiden name, if applicable:

Attorney/Client-Privileged Information

2.	Where are you living now, and what is your phone number? Address:			
	City: County: State:			
	Zip: Home phone:			
3.	Who else lives in your household?			
4.	At what address do you wish to receive mail from this office?			
5.	How do you prefer that we contact you?			
	Address:			
	Phone: Fax:			
	Pager: Mobile phone:			
	E-mail:			
	(e-mail communications may not be confidential)			
6.	Who referred you to this office?			
7.	Have you consulted or retained any other attorneys on this matter before coming to thi			
	office?			
	Is so, please state who and when:			
8.	Please give the following information concerning your employment.			
	Employer:			
	Job title:			
	Street address:			
	City, state, zip:			
	Phone: May we call you at work?			

Attorney/Client-Privileged Information

	E-mail:	May we e-mail you at work?		
	Monthly gross salary:			
	Annual gross salary:			
	Length of employment:			
	Education/training:			
About your spouse:				
9.	Please give the following info	ormation.		
	Full name:			
	Date of birth:	Place of birth:		
	Social Security number:			
	Driver's license number and s	tate:		
	Maiden name, if applicable:			
10.	Where is your spouse living the e-mail address?	now, and what is his or her phone number and		
	Address:			
	City:	County: State:		
	Zip:	Home phone:		
	Home e-mail:			
11.	Who else lives in your spous	e's household?		
12.	Please give the following info	ormation concerning your spouse's employment.		
	Employer:			
	Job title:			

Attorney/Client-Privileged Information

	Phone: Fax:		
	E-mail:		
	Monthly gross salary:		
	Annual gross salary:		
	Length of employment:		
	Education/training:		
About	your marriage and separation:		
24.	Please give the date and place of your marriage.		
	Date: Place:		
	Are you now separated from your spouse?		
	If so, please state date of separation:		
25.	Have you seen a marriage counselor?		
	If so, please state name:		
26.	Have you and your spouse attempted reconciliation?		
	If not, would you like to attempt reconciliation?		
27.	What is your religious preference?		
28.	What is your spouse's religious preference?		
29.	Check as appropriate if your marital difficulties involve any of the following:		
	drugs/alcohol financial dispute physical violence		
	emotional abuse your infidelityreligion		
	confinement in noncohabitation your spouse's mental institution for at least 3 years infidelity for at least 3 years infidelity other:		

30. How long have you lived in Texas?

How long have you lived in the county where you now reside? Have you or your spouse ever filed for divorce? 31. If so, when and where? Does your spouse have an attorney? 32. If so, who? If a divorce is granted, should the wife's name be restored to her maiden name? 33. If so, what name should be used? Have you or your spouse ever sought or been subject to a protective order? 34. Have you or your spouse ever been arrested for or convicted of a crime other than receiving a traffic ticke 35. **Bankruptcy:** Are you currently in bankruptcy? _____ Are you considering filing bankruptcy? _____ 36. Assets: Briefly list your and your spouse's assets and debts (house, cars, credit cards, etc.) 37.