

EILEEN WARSHAW – ATTORNEY AT LAW

MEETING DATE AND LOCATION \_\_\_\_\_

ENGAGEMENT FEE/COSTS PAID \_\_\_\_\_

DIVORCE INTAKE WORKSHEET

**CLIENT NAME** \_\_\_\_\_

HOW CONTACTED OFFICE/REFERRAL/WEBSITE/ETC.: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

DATE OF BIRTH/AGE \_\_\_\_\_ STATE BORN IN \_\_\_\_\_

SS# \_\_\_\_\_ DRIVER LICENSE # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SEND MAIL TO: \_\_\_\_\_

HOW LONG AT ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EDUCATION: \_\_\_\_\_

SOCIAL MEDIA USED: \_\_\_\_\_

LAST TIME CHANGED PASSWORDS ON BANK/SOCIAL ACCOUNTS: \_\_\_\_\_

MILITARY SERVICE AT ANY TIME/WHEN: \_\_\_\_\_

**SPOUSE NAME** \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

DATE OF BIRTH/AGE \_\_\_\_\_ STATE BORN IN \_\_\_\_\_

SS# \_\_\_\_\_ DRIVER LICENSE # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOW LONG AT ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EDUCATION: \_\_\_\_\_

SOCIAL MEDIA USED: \_\_\_\_\_

MILITARY SERVICE AT ANY TIME/WHEN: \_\_\_\_\_

**CHILD(REN):**

**NAME(S)**

**DATE OF BIRTH/AGE**

**ADDRESS**

NAME(S)	DATE OF BIRTH/AGE	ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ADDRESS(ES) OF CHIL(REN) FOR THE LAST FIVE YEARS: \_\_\_\_\_

PRIOR OR PENDING LITIGATION INVOLVING THE CHILD(REN): \_\_\_\_\_

CURRENT CUSTODY STATUS OF CHILD(REN): \_\_\_\_\_

REQUESTED CUSTODY OF CHILD(REN): \_\_\_\_\_

DAY CARE/LATCHKEY PROVIDERS AND COSTS:

CHILD SUPPORT REQUESTED: \_\_\_\_\_ IN CONFORMITY/NOT \_\_\_\_\_

REASONS FOR NON-CONFORMITY: \_\_\_\_\_

STATE AIDE TO CHILDREN IN CASE/TYPE OF AIDE:

SOCIAL SERVICES/FAMILY AGENCY INVOLVEMENT/ JUVENILE COURT:

**MINOR CHILDREN OF EITHER PARTY NOT INVOLVED IN THIS CASE:**

NAME	DATE OF BIRTH/AGE	LOCATION
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**WHO CARRIES MEDICAL/DENTAL/OPTICAL INSURANCE:**

NAME OF INSURANCE COMPANY(IES): \_\_\_\_\_

POLICY/CONTRACT# \_\_\_\_\_

DATE OF **MARRIAGE** \_\_\_\_\_

CITY/COUNTY AND STATE WHERE MARRIED: \_\_\_\_\_

DATE OF SEPARATION: \_\_\_\_\_ # OF CHILDREN IN HOUSEHOLD \_\_\_\_\_  
CLIENT PRIOR MARRIAGES: \_\_\_\_\_ SPOUSE PRIOR MARRIAGES: \_\_\_\_\_  
MAIDEN NAME OF CLIENT \_\_\_\_\_ RESTORED: \_\_\_\_\_  
MAIDEN NAME OF SPOUSE \_\_\_\_\_ RESTORED: \_\_\_\_\_  
PRIOR FAMILY COURT CASE IF ANY \_\_\_\_\_

CLIENT EYE COLOR \_\_\_\_\_ HAIR COLOR \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_  
RACE \_\_\_\_\_ SCARS/TATOOS \_\_\_\_\_  
SPOUSE EYE COLOR \_\_\_\_\_ HAIR COLOR \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_  
RACE \_\_\_\_\_ SCARS/TATOOS \_\_\_\_\_

**CLIENT EMPLOYER:** \_\_\_\_\_ **POSITION:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_ **GROSS INCOME:** \_\_\_\_\_  
\_\_\_\_\_ **NET INCOME:** \_\_\_\_\_  
**HOW LONG AT CURRENT EMPLOYMENT** \_\_\_\_\_  
**PENSION:** \_\_\_\_\_ **401K** \_\_\_\_\_ **MEDICAL** \_\_\_\_\_  
**LIFE INSURANCE:** \_\_\_\_\_ **HOURS PER WEEK:** \_\_\_\_\_  
**OTHER PERKS:** \_\_\_\_\_

**CLIENT PRIOR EMPLOYMENT DURING MARRIAGE:** \_\_\_\_\_  
**RETIREMENT /BENEFITS FROM PRIOR EMPLOYER:** \_\_\_\_\_

**SPOUSE EMPLOYER:** \_\_\_\_\_ **POSITION:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_ **GROSS INCOME:** \_\_\_\_\_  
\_\_\_\_\_ **NET INCOME:** \_\_\_\_\_  
**HOW LONG AT CURRENT EMPLOYMENT** \_\_\_\_\_  
**PENSION:** \_\_\_\_\_ **401K** \_\_\_\_\_ **MEDICAL** \_\_\_\_\_  
**LIFE INSURANCE:** \_\_\_\_\_ **HOURS PER WEEK:** \_\_\_\_\_  
**OTHER PERKS:** \_\_\_\_\_

**SPOUSE PRIOR EMPLOYMENT DURING MARRIAGE:** \_\_\_\_\_  
**RETIREMENT /BENEFITS FROM PRIOR EMPLOYER:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_  
**PURCHASE PRICE:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_  
**CURRENT MORTGAGE:** \_\_\_\_\_ **HOME EQUITY LOAN:** \_\_\_\_\_

ESTIMATED PRESENT VALUE: \_\_\_\_\_

ESTIMATED EQUITY: \_\_\_\_\_

OWNERSHIP: \_\_\_\_\_ SOURCE OF FUNDS: \_\_\_\_\_

MONTHLY PAYMENT: \_\_\_\_\_

**OTHER REAL ESTATE ADDRESS:** \_\_\_\_\_

PURCHASE PRICE: \_\_\_\_\_ YEAR: \_\_\_\_\_

CURRENT MORTGAGE: \_\_\_\_\_ HOME EQUITY LOAN: \_\_\_\_\_

ESTIMATED PRESENT VALUE: \_\_\_\_\_

ESTIMATED EQUITY: \_\_\_\_\_

OWNERSHIP: \_\_\_\_\_ SOURCE OF FUNDS: \_\_\_\_\_

MONTHLY PAYMENT: \_\_\_\_\_

**BROKERAGE ACCOUNTS:**

\_\_\_\_\_  
\_\_\_\_\_

**BONDS:** \_\_\_\_\_

**BANK ACCOUNTS/ BANK NAME/CHECKING/SAVINGS/JOINT OR INDIVIDUAL:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LIFE INSURANCE:** \_\_\_\_\_

**RETIREMENT ACCOUNTS:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**COLLEGE FUNDS/529 ACCOUNTS FOR CHILDREN:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**LAWSUITS/CASES/SETTLEMENTS:** \_\_\_\_\_

\_\_\_\_\_



**PRIOR/CURRENT BANKRUPTCY:** \_\_\_\_\_

**DOMESTIC VIOLENCE ISSUES/DATES/POLICE REPORTS**

\_\_\_\_\_  
\_\_\_\_\_

**ISSUES IN CASE**

CUSTODY/PARENTING TIME \_\_\_\_\_

SPOUSAL SUPPORT \_\_\_\_\_

FAULT/ALCOHOL/DRUGS/GAMBLING/INFIDELITY \_\_\_\_\_

OTHER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEADINGS TO BE COMPLETED BY EILEEN WARSHAW:**

_____ COMPLAINT	_____ SUMMONS
_____ ANSWER	_____ COUNTER CLAIM
_____ STATUS QUO	_____ ACKNOWLEDGMENT OF SERVICE
_____ MUTUAL INJUNCTION	_____ RECORD OF DIVORCE/ANNULMENT
_____ PROCESS SERVER	_____ VERIFIED STATEMENT
_____ EX-PARTE INTERIM ORDER	_____ ENGAGEMENT FEE/FEE AGREEMENT
_____ JUDGMENT INFO. FORM	_____ UNIFORM SUPPORT ORDER
_____ SPOUSAL SUPPORT	_____ CUSTODY/PARENTING TIME
_____ MOTION	_____ NICE LETTER

I AUTHORIZE THE USE OF EMAIL TO COMMUNICATE WITH EILEEN WARSHAW DURING THIS CASE.

SIGN \_\_\_\_\_ DATE \_\_\_\_\_