

HAND LAW FIRM

ATTORNEY AT LAW



CONFIDENTIAL CLIENT INFORMATION FORM

CHILD CUSTODY

Today's Date: _____

Personal Information

Custodial Parent/Client

Name: _____ Maiden/Former Name: _____

Date of Birth: _____ Social Security Number: _____

Phone#: (H) _____ (C) _____

E-Mail: _____

*Cellular phones and Email will be used for communication and billing purposes.

Home Address: _____

Home Address since: _____

*****Confidential information will be sent to your email address and your home address provided here*****

Alternate Contact

Name: _____ Telephone: _____ Relationship: _____

Minor Children of Marriage (Either born of or adopted):	Name	Date of Birth	Social Security Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Non-Custodial parent

Name: _____ Maiden/Former Name: _____

Date of Birth: _____ Social Security Number: _____

Phone#: (H) _____ (C) _____

E-Mail: _____



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Home Address: _____

_____ Home Address since: _____

Spouse's Attorney: _____ Attorney's Telephone: _____

Attorney's Address: _____

Marital Information

Marital Status: ☐ Married ☐ Divorced ☐ Separated ☐ Widowed

Date of Marriage: _____ Place of Marriage: _____

Are you and your spouse living together now? ☐ Yes ☐ No

If no, what was the date of separation? _____

Where were you living at the time of separation? _____

If separated, and if all of your addresses since separation are not listed above, please list additional addresses here:

Address	From	To
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

Please list all prior marriages of yours and of your present spouse. (Include names of all prior spouses, how, when, and where prior marriages were terminated, and provide copies of relevant court orders and separation agreements.)

Yourself: _____

Your Spouse: _____

List name and ages of any children of yourself or your spouse other than those listed above. State with whom such children live, who has their legal custody, and whether they have been adopted.



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Yourself: _____

Your Spouse: _____

Your Employment

Employer: _____

Address: _____

Position: _____ Date Started: _____

Gross Weekly Pay: _____ Net Weekly Pay: _____

Prior Employment:

Employer Name	Position Held	Dates of Employment	Reason for Leaving
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Your Spouse's Employment

Employer: _____

Address: _____

Position: _____ Date Started: _____



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Gross Weekly Pay: _____

Net Weekly Pay: _____

Educational Background

Degrees awarded or highest educational level reached:

By yourself: _____

By your spouse: _____

Are there any daycare expenses being incurred for the children:

Are the children covered by health insurance? If so please list who carries the health insurance, cost of insurance and give a copy of the insurance card.

Do you know of any pending court action involving these children either with the juvenile court system, DHR, or another custody hearing?

Have you and the other parent discussed any type of settlement arrangements? If so list them clearly below



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Please explain what you would like the outcome of this case to be in detail:

