

CONFIDENTIAL CLIENT INFORMATION WORKSHEET

Please complete to the best of your abilities and return to Riah@wassermanlawoffice.com prior to your consultation.

<u>YOUR INFORMATION</u>	
Legal name (First, Middle, Last)	
Nickname (if applicable)	
Preferred pronouns	
Date of Consult	
Maiden name (if applicable)	
Current address	
Do you own or rent?	
Phone Number (where we can leave a message)	
E-mail address (where we can send information from our office confidentially)	
Mailing address	
Length of time at current residence	
Who else lives at current residence with you?	
Your date of birth	
Last 4 digits of social security number	
Employer (current)	
Job title	
Work address	
Work schedule	
Number of years at job	
Current salary	
Bonus?	

Chronic medical issues?	
Highest level of education	
<u>OPPOSING PARTY'S INFORMATION</u>	
Legal name (first, middle, last)	
Nickname/Maiden name?	
Current address	
Preferred pronouns	
Email address	
Date of birth	
Last 4 digits of social security number	
Employer (current)	
Job title	
Work address	
Work schedule	
Number of years at job	
Current salary	
Bonus?	
Chronic medical issues?	
<u>CHILDREN</u>	
Children: -names, ages, grade/school, any health or learning issues?	
Costs for School/Childcare	
Health Insurance - Name of Plan	
Health Insurance - Who covers you?	
Health Insurance - Who covers the child/ren?	
Any orders/agreements in place addressing custody or support? What is the current access schedule? <i>-if in writing, email a copy to our office prior to consultation</i>	

Any history of:	
<ul style="list-style-type: none"> • Domestic violence? 	
<ul style="list-style-type: none"> • Substance abuse? 	
<ul style="list-style-type: none"> • Protective orders? 	
<ul style="list-style-type: none"> • Criminal history? 	
FOR DIVORCE CASE	
Date of marriage	
Religious or civil marriage ceremony?	
County/state where marriage took place	
Prior marriages/ divorce	
Children from other relationships? -Names, ages, custody arrangement?	
Date you and spouse began living in separate households (if applicable)	
<u>ASSETS:</u>	
<u>Vehicles/motorcycles/boats</u> -Owner -Value -Loan	
<u>Real property</u> -Address -Owner -Date of purchase -Non-marital funds used to acquire? Amount? -Est. value today -Mortgage/line of credit? -Amount owed?	
<u>Bank accounts</u> -Owner -Type of account -Where held -Est. Balance	

<u>Investment accounts</u> -Owner -Type of account -Where held -Amount	
<u>Retirement accounts</u> -Owner -Type of account -Where held -Amount	
<u>Pensions</u> -Owner -Where held -Vested?	
<u>Personal property of value</u> (furniture/furnishings, jewelry, collections, crystal)	
<u>Either or spouse own a business?</u>	
<u>Non-marital assets</u> (gifts, inheritance, pre-marital, excluded by agreement)	
<u>529/college savings</u>	
<u>Other assets?</u>	
<u>DEBTS:</u>	
Debts (other than car or house):	
• Credit cards	
• Loans (personal or bank)	
• Prior bankruptcy?	
<u>OTHER:</u>	
Do you have a prenuptial or postnuptial agreement?	

What else is important for us to know about your situation?	
What are your goals for the consultation?	
How were you referred to our office?	

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