

TINDALL ENGLAND PC
CONFIDENTIAL FAMILY LAW QUESTIONNAIRE
(Post-Divorce/Modification)

Date: _____

Please complete this questionnaire. If you will spend the time to complete all items, you will give us the background information necessary to begin to understand the complexity of your family law matter. All information will be held in strict confidence.

PERSONAL DATA:

1. Please give your **full** name, date and place of birth:

- a. Name: _____
(First) (Middle) (Last) (Maiden)
- b. Date of Birth: _____
- c. Place of Birth: _____

2. Where are you living now and what is your telephone number?

- a. Street Address: _____
- b. City, State & Zip: _____
- c. Residence telephone number: _____
- d. Mobile phone: _____
- e. E-Mail Address: _____

NOTE: We recommend you refrain from communicating with us on any device provided by your employer or any computer, smart phone, tablet computer, or other device shared with someone else. In addition, when communicating with us, please do not use your work email address or a shared email account. You should utilize only a private email account that is password protected and accessed solely by you when you communicate with us.

3. Please complete the following concerning your employment:

- a. Employer: _____ Job Title: _____
- b. Street Address: _____
- d. City, State & Zip: _____
- e. Telephone Number: _____
- e. Fax Number: _____
- f. Length of Employment: _____
- g. Gross Salary per month or annually: _____
- h. Education: _____

PRESENT MARRIAGE:

4. Information regarding your present spouse:

- a. Name: _____
(First) (Middle) (Last) (Maiden)
- b. Date of Marriage to present spouse: _____
- c. Present spouse's employer: _____
- d. Present spouse's Work Number: _____

5. Please give **full** name, date, place of birth, and sex of each child of your **present** marriage:

| <u>Name & Sex (M/F)</u> | <u>Date and Place of Birth</u> |
|-----------------------------|--------------------------------|
| a. _____ | _____ |
| b. _____ | _____ |
| c. _____ | _____ |

PRIOR MARRIAGE:

6. Information regarding your ex-spouse:

a. Name: _____
(First) (Middle) (Last) (Maiden)

b. Home Address: _____

c. City, State & Zip Code: _____

d. Place of Employment: _____

e. Employment Address: _____

7. Date of Divorce: _____

8. City/State where divorced: _____

9. Please give **full** name, sex, date and place of birth of each child of your **prior** marriage:

| <u>Name & Sex (M/F)</u> | <u>Date and Place of Birth</u> |
|-----------------------------|--------------------------------|
| a. _____ | _____ |
| b. _____ | _____ |
| c. _____ | _____ |

10. With whom do these children reside? _____

11. Has your ex-spouse remarried? _____

12. If so, when? _____

13. Please indicate which items are a problem at this time:

- Amount of child support
- Non-payment of child support
- Visitation
- Change in Custody
- Other (specify):

14. At what address do you wish to receive mail from this office?

(Street Address) (City) (State) (Zip)

15. Who referred you to this office? _____

I understand that there will be an initial consultation fee equal to the hourly rate for the attorney with whom I am consulting. This consultation fee is to be paid on the same date as the consultation.

(Your signature)